



Notice: Fill out COMPLETELY and return to Conservation Division at the address below within 60 days from plugging date.

KANSAS CORPORATION COMMISSION 1159618
OIL & GAS CONSERVATION DIVISION
WELL PLUGGING RECORD
 K.A.R. 82-3-117

Form CP-4
March 2009

Type or Print on this Form
Form must be Signed
All blanks must be Filled

OPERATOR: License #: _____
 Name: _____
 Address 1: _____
 Address 2: _____
 City: _____ State: _____ Zip: _____ + _____
 Contact Person: _____
 Phone: (_____) _____
 Type of Well: (Check one) Oil Well Gas Well OG D&A Cathodic
 Water Supply Well Other: _____ SWD Permit #: _____
 ENHR Permit #: _____ Gas Storage Permit #: _____
 Is ACO-1 filed? Yes No If not, is well log attached? Yes No
 Producing Formation(s): List All (If needed attach another sheet)
 _____ Depth to Top: _____ Bottom: _____ T.D. _____
 _____ Depth to Top: _____ Bottom: _____ T.D. _____
 _____ Depth to Top: _____ Bottom: _____ T.D. _____

API No. 15 - _____
 Spot Description: _____
 _____ - _____ - _____ - _____ Sec. _____ Twp. _____ S. R. _____ East West
 _____ Feet from North / South Line of Section
 _____ Feet from East / West Line of Section
 Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
 County: _____
 Lease Name: _____ Well #: _____
 Date Well Completed: _____
 The plugging proposal was approved on: _____ (Date)
 by: _____ (KCC District Agent's Name)
 Plugging Commenced: _____
 Plugging Completed: _____

Show depth and thickness of all water, oil and gas formations.

Oil, Gas or Water Records		Casing Record (Surface, Conductor & Production)			
Formation	Content	Casing	Size	Setting Depth	Pulled Out

Describe in detail the manner in which the well is plugged, indicating where the mud fluid was placed and the method or methods used in introducing it into the hole. If cement or other plugs were used, state the character of same depth placed from (bottom), to (top) for each plug set.

Plugging Contractor License #: _____ Name: _____
 Address 1: _____ Address 2: _____
 City: _____ State: _____ Zip: _____ + _____
 Phone: (_____) _____
 Name of Party Responsible for Plugging Fees: _____
 State of _____ County, _____, ss.
 _____ Employee of Operator or Operator on above-described well,
 (Print Name)

being first duly sworn on oath, says: That I have knowledge of the facts statements, and matters herein contained, and the log of the above-described well is as filed, and the same are true and correct, so help me God.

Submitted Electronically

Mail to: KCC - Conservation Division, 130 S. Market - Room 2078, Wichita, Kansas 67202

Notice: Fill out COMPLETELY and return to Conservation Division at the address below within 60 days from plugging date.

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION
WELL PLUGGING RECORD
K.A.R. 82-3-117

Form CP-4
March 2009
Type or Print on this Form
Form must be Signed
All blanks must be Filled

OPERATOR: License #: 33450
Name: Terra Firma Exploration Inc
Address 1: 12601 Jayson Ln
Address 2: _____
City: Wichita State: Ks Zip: _____ + _____
Contact Person: Kerry Parham
Phone: (316) 722-3367
Type of Well: (Check one) Oil Well Gas Well OG D&A Cathodic
 Water Supply Well Other: _____ SWD Permit #: _____
 ENHR Permit #: _____ Gas Storage Permit #: _____
Is ACO-1 filed? Yes No If not, is well log attached? Yes No
Producing Formation(s): List All (if needed attach another sheet)
_____ Depth to Top: 3214 Bottom: 3224 T.D. 4922
_____ Depth to Top: 3236 Bottom: 3291 T.D. _____
_____ Depth to Top: 4448 Bottom: 4454 T.D. _____
_____ Depth to Top: 4655 Bottom: 4660 T.D. _____

API No. 15 - 007-00425-00-01
Spot Description: 100'S NW SE
N2S2 NW SE Sec. _____ Twp. _____ S. R. _____ East West
1880 Feet from North / South Line of Section
1980 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Barber
Lease Name: National Gypsum Well #: A2
Date Well Completed: _____
The plugging proposal was approved on: 4/30/2013 (Date)
by: Eric MacLaren (KCC District Agent's Name)
Plugging Commenced: 5/1/2013
Plugging Completed: 5/7/2013

Show depth and thickness of all water, oil and gas formations.

Oil, Gas or Water Records		Casing Record (Surface, Conductor & Production)			
Formation	Content	Casing	Size	Setting Depth	Pulled Out
		Surface	10 3/4	757	None
		Production	5 1/2	4922	2850'

Describe in detail the manner in which the well is plugged, indicating where the mud fluid was placed and the method or methods used in introducing it into the hole. If cement or other plugs were used, state the character of same depth placed from (bottom), to (top) for each plug set.

Set CIBP at 3140' spotted 25x cement on Bridge Plug - Lay Down Casing - Run Tubing
In to 780' pumped 205x gel - 355x 60/40 po2 490gel - 2nd 360' pumped 755x - 90' circulated 455x
cement to surface

Plugging Contractor License #: _____ Name: _____
Address 1: _____ Address 2: _____
City: _____ State: _____ Zip: _____ + _____
Phone: (____) _____
Name of Party Responsible for Plugging Fees: _____
State of _____ County, _____, ss. _____

(Print Name) Employee of Operator or Operator on above-described well,

being first duly sworn on oath, says: That I have knowledge of the facts statements, and matters herein contained, and the log of the above-described well is as filed, and the same are true and correct, so help me God.

Signature: _____

ALLIED OIL & GAS SERVICES, LLC 059855

Federal Tax I.D.# 20-5975804

REMIT TO P.O. BOX 93999
SOUTHLAKE, TEXAS 76092

SERVICE POINT:
Medicine Lodge KS

DATE <u>5/26/18</u>	SEC. <u>10</u>	TWP. <u>31E</u>	RANGE <u>15W</u>	CALLED OUT	ON LOCATION	JOB START	JOB FINISH <u>5:15 PM</u>
LEASE # <u>5510718</u>		WELL # <u>A-2</u>		LOCATION <u>Sun City, KS, Southern 1st Ave 2nd, West</u>		COUNTY <u>Barber</u>	STATE <u>KS</u>
<input checked="" type="radio"/> OLD <input type="radio"/> NEW (Circle one)				on <u>White Sands Rd Post Shop</u>			

CONTRACTOR Clark Corp
 TYPE OF JOB OHP
 HOLE SIZE 7 7/8 T.D.
 CASING SIZE 10 3/8 DEPTH 757
 TUBING SIZE 2 3/8 DEPTH
 DRILL PIPE DEPTH
 TOOL DEPTH
 PRES. MAX MINIMUM
 MEAS. LINE SHOE JOINT
 CEMENT LEFT IN CSG.
 PERFS.
 DISPLACEMENT Fresh H₂O

OWNER Terra Firma Expl
 CEMENT
 AMOUNT ORDERED 20 ss Gel, 195 ss (0.40:4%) Gel

EQUIPMENT
 PUMP TRUCK CEMENTER Sasac Tharoch
 # 471/265 HELPER Jake Heard
 BULK TRUCK
 # 756/290 DRIVER James Bowen
 BULK TRUCK
 # DRIVER

COMMON <u>A-117</u>	@ <u>17.90</u>	<u>2096.30</u>
POZMIX <u>68</u>	@ <u>9.35</u>	<u>635.80</u>
GEL <u>27</u>	@ <u>23.40</u>	<u>631.80</u>
CHLORIDE	@	
ASC	@	
	@	
	@	
	@	
	@	
	@	
	@	
HANDLING <u>240</u>	@ <u>2.48</u>	<u>595.20</u>
MILEAGE <u>9.72/25/2.60</u>		<u>231.82</u>
TOTAL		<u>4588.92</u>

REMARKS:

SERVICE

DEPTH OF JOB 1250.00
 PUMP TRUCK CHARGE
 EXTRA FOOTAGE @
 MILEAGE 25 @ N/C
 MANIFOLD LU 25 @ N/C

CHARGE TO: Terra Firma Expl
 STREET _____
 CITY _____ STATE _____ ZIP _____

TOTAL 1250.00

PLUG & FLOAT EQUIPMENT

@ _____
 @ _____
 @ _____
 @ _____
 @ _____

TOTAL _____

To: Allied Oil & Gas Services, LLC.
 You are hereby requested to rent cementing equipment and furnish cementer and helper(s) to assist owner or contractor to do work as is listed. The above work was done to satisfaction and supervision of owner agent or contractor. I have read and understand the "GENERAL TERMS AND CONDITIONS" listed on the reverse side.

SALES TAX (if Any) _____
 TOTAL CHARGES 5838.92
 DISCOUNT _____ IF PAID IN 30 DAYS
(Net) 4671.13

PRINTED NAME Mark Morganstern
 SIGNATURE Mark Morganstern