



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

KANSAS CORPORATION COMMISSION 1159824
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

QUALITY OILWELL CEMENTING, INC.

Federal Tax I.D.# 20-2886107

Phone 785-483-2025
Cell 785-324-1041

Home Office P.O. Box 32 Russell, KS 67665

No. 6405

Date	1-30-13	Sec.	6	Twp.	22	Range	16	County	PAWNEE	State	KANSAS	On Location	7:30 AM	Finish	3:45 pm
Location								LARNED 56 Hwy - 2 W - 1/8 N - E/INTO							

Lease	FISHER	Well No.	#1-6	Owner	CAPTIVA
Contractor	STERLING #2	To Quality Oilwell Cementing, Inc. You are hereby requested to rent cementing equipment and furnish cementer and helper to assist owner or contractor to do work as listed.			

Type Job	L. SURFACE	Charge To	CAPTIVA
Hole Size	12 1/4"	T.D.	1,035'
Csg.	8 5/8"	Depth	1,030'
Tbg. Size		Depth	
Tool		Depth	
Cement Left in Csg.		Shoe Joint	35.40
Meas Line		Displace	63 1/4 BBLs
Cement Amount Ordered		450 ⁶⁰ / ₄₀ 202 ³⁰ / ₂₀ 29 GEL. 1/4 FLO	

EQUIPMENT				Common	270
Pumptrk #15	No.	Cementer		Poz. Mix	180
		Helper	NICK	Gel.	10
Bulktrk #	No.	Driver	BILLY	Calcium	18
		Driver	CTSCO	Hulls	

JOB SERVICES & REMARKS				Salt	
Remarks: Q.O.C. HEAD & MANTLE ON LOCATION.				Flowseal	112 #
Rat Hole				Koi-Seal	
Mouse Hole				Mud CLR 48	
Centralizers				CFL-117 or CD110 CAF 38	
Baskets				Sand	
D/V or Port Collar				Handling	478

CEMENT DID CIRCULATE!				Mileage	
FLOAT EQUIPMENT					
				Guide Shoe	1-8 5/8" SLIP ON.
				Centralizer	
				Baskets	
				AFU Inserts	
				Float Shoe	
				Latch Down	1-8 5/8" RUBBER PLUG

				Pumptrk Charge	Long Surface
				Mileage	32
				Tax	
				Discount	
				Total Charge	

THANK YOU!

X Signature 

ALLIED OIL & GAS SERVICES, LLC 059257

Federal Tax I.D.# 20-5975804

REMIT TO P.O. BOX 93999
SOUTH LAKE, TEXAS 76092

SERVICE POINT:

West Bend, Ia

DATE <i>2-5-13</i>	SEC <i>6</i>	TWP. <i>22</i>	RANGE <i>16</i>	CALLED OUT <i>8:30 PM</i>	ON LOCATION <i>11:00 PM</i>	JOB START <i>6:00 AM</i>	JOB FINISH <i>7:00 AM</i>
LEASE <i>Fisher</i>	WELL# <i>1-6</i>	LOCATION <i>land 2 west on Gro Hwy</i>			COUNTY <i>Polk</i>	STATE <i>Ia</i>	
OLD OR <u>NEW</u> (Circle one)			<i>1/6 North, East into</i>			<i>1.03</i>	

CONTRACTOR *Stealing Rig #2*

TYPE OF JOB *Rotary Plug*

HOLE SIZE *7 7/8"* TD. *3961'*

CASING SIZE _____ DEPTH _____

TUBING SIZE _____ DEPTH _____

DRILL PIPE *4 1/2"* DEPTH *3880'*

TOOL _____ DEPTH _____

PRES. MAX _____ MINIMUM _____

MEAS. LINE _____ SHOE JOINT _____

CEMENT LEFT IN CSG. _____

PERFS. _____

DISPLACEMENT _____

OWNER *Seneca*

CEMENT AMOUNT ORDERED *210 lb 60/40, 480 net*

EQUIPMENT

PUMP TRUCK CEMENTER *Tom Dickson 1*

316 HELPER *Ravin Eddy 2*

BULK TRUCK

341 DRIVER *Dan Cooper 2*

BULK TRUCK

_____ DRIVER _____

COMMON	<i>126</i>	@ <i>17.90</i>	<i>2,255.40</i>
POZMIX	<i>84</i>	@ <i>9.35</i>	<i>785.40</i>
GEL	<i>7</i>	@ <i>23.40</i>	<i>163.80</i>
CHLORIDE		@	
ASC		@	
HANDLING	<i>221.66</i>	@ <i>2.48</i>	<i>549.72</i>
MILEAGE	<i>9.38 x 22 x</i>	@ <i>2.60</i>	<i>536.88</i>
			TOTAL <i>4,290.84</i>

REMARKS:

50 lb at 3880'

50 lb at 1000'

40 lb at 180'

20 lb at 10'

30 lb in Rotator

20 lb in manifold

206.35

SERVICE

DEPTH OF JOB	<i>3880'</i>		
PUMP TRUCK CHARGE		@ <i>2600.47</i>	
EXTRA FOOTAGE		@	
MILEAGE	<i>Hum 22</i>	@ <i>7.70</i>	<i>169.40</i>
MANIFOLD		@	
	<i>Hum 22</i>	@ <i>4.40</i>	<i>96.80</i>
			TOTAL <i>2,866.67</i>

CHARGE TO: *Captiva*

STREET _____

CITY _____ STATE _____ ZIP _____

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.

PRINTED NAME _____

SIGNATURE *[Signature]*

PLUG & FLOAT EQUIPMENT

TOTAL _____

SALES TAX (If Any)	<i>594.07</i>
TOTAL CHARGES	<i>7,157.51</i>
DISCOUNT	<i>1,431.54</i>
IF PAID IN 30 DAYS	
<i>5,726.00</i>	