

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

the same are true and correct, so help me God.

KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

1162004

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

WELL PLUGGING RECORD K.A.R. 82-3-117

| OPERATOR: License #: | | | | API No. 15 | | | | |
|--------------------------------------|-----------------------------|--|----------|---|-----------------------|-------------------------|----------------------|---------------------|
| Name: | | | | Spot Description: | | | | |
| Address 1: | | | | | Sec | Twp S. R | East West | |
| Address 2: | | | | | Feet from | North / Sout | h Line of Section | |
| City: State: Zip: + | | | | Feet from East / West Line of Section | | | | |
| Contact Person: | | | | Footages Calculated from Nearest Outside Section Corner: NE NW SE SW | | | | |
| | | | | | | | | County: |
| | | | | Water Supply Well Other: SWD Permit #: SWD Permit #: | | | | Lease Name: Well #: |
| ENHR Permit #: Gas Storage Permit #: | | | | Date Well Completed: | | | | |
| Is ACO-1 filed? Yes | — | ell log attached? Yes | No | The plugging proposal was approved on: (Date) | | | | |
| Producing Formation(s): List / | | | | by: (KCC District Agent's Name) | | | | |
| Depth to | • | om: T.D | | Plugging Commenced: | | | | |
| • | • | om: T.D | | Plugging Completed: | | | | |
| Depth to | o Top: Bott | om:T.D | | | | | | |
| | | | I | | | | | |
| Show depth and thickness of | all water, oil and gas form | nations. | | | | | | |
| Oil, Gas or Wate | r Records | | Casing F | Record (Surface, Conductor & Production) | | | | |
| Formation | Content | Casing | Size | | Setting Depth | Pulled Out | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | ged, indicating where the muc if same depth placed from (bo | | • | | ods used in introducing | it into the hole. If | |
| Plugging Contractor License #: | | | Name: _ | | | | | |
| Address 1: | | | Address | 2: | | | | |
| City: | | | | State: | | Zip: | + | |
| Phone: () | | | | _ | | | | |
| Name of Party Responsible for | or Plugging Fees: | | | | | | | |
| State of | County, | | | , ss. | | | | |
| | | | | Fn | nplovee of Operator o | Operator on above | e-described well | |
| | (Print Name) | | | | | operator on above | - accombod won, | |

Submitted Electronically

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

| Form | CP4 - Well Plugging Record | | | |
|-----------|-------------------------------------|--|--|--|
| Operator | Bach, Jason dba Bach Oil Production | | | |
| Well Name | REYNOLDS 1 | | | |
| Doc ID | 1162004 | | | |

Producing Formations

| Formation | Тор | Bottom | Total Depth |
|-----------|------|--------|-------------|
| Toronto | 3173 | 3176 | 3350 |
| LKC | 3191 | 3196 | 3350 |
| LKC | 3224 | 3230 | 3350 |
| LKC | 3243 | 3249 | 3350 |
| LKC | 3261 | 3268 | 3350 |