



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

KANSAS CORPORATION COMMISSION 1167086
OIL & GAS CONSERVATION DIVISION

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 #: _____
 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



PO BOX 31 Russell, KS 67665

Voice: (785) 483-3887
Fax: (785) 483-5566

TCO'S —
cc: WJF
cc: Leang P 1

INVOICE

Invoice Number: 124586

Invoice Date: Sep 21, 2010

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30
P-A
USED FOR APPROVED

Federal Tax I.D.#: 20-5975804

Bill To:
Murfin Drlg. Co., Inc.
250 N. Water
STE #300
Wichita, KS 67202

Customer ID	Well Name# of Customer PO	Payment Terms
Murfin	Dibolt #6-4	Net 30 Days
Job Location	Camp Location	Service Date
KS2-03	Oakley	Sep 21, 2010
		10/21/10

Quantity	Item	Description	Unit Price	Amount
180.00	MAT	Class A Common	13.50	2,430.00
120.00	MAT	Pozmix	7.55	906.00
22.00	MAT	Gel	20.25	445.50
10.00	MAT	Cottonseed Hulls	31.05	310.50
487.00	SER	Handling	2.25	1,095.75
40.00	SER	Mileage 487 sx @ .10 per sk per mi	48.70	1,948.00
1.00	SER	Plug to Abandon	1,045.00	1,045.00
40.00	SER	Pump Truck Mileage	7.00	280.00

Subtotal	8,460.75
Sales Tax	638.79
Total Invoice Amount	9,099.54
Payment/Credit Applied	
TOTAL	9,099.54

ALL PRICES ARE NET, PAYABLE 30 DAYS FOLLOWING DATE OF INVOICE. 1 1/2% CHARGED THEREAFTER. IF ACCOUNT IS CURRENT, TAKE DISCOUNT OF

\$ 2115.00

ONLY IF PAID ON OR BEFORE
Oct 16, 2010



ALLIEL CEMENTING CO., LLC. 035464

Federal Tax I.D.# 20-5975804

REMIT TO P.O. BOX 31
RUSSELL, KANSAS 67665

SERVICE POINT:

Osage Hwy 161

DATE <i>7/2/10</i>	SEC. <i>20</i>	TWP. <i>10</i>	RANGE <i>23</i>	CALLED OUT	ON LOCATION	JOB START <i>10:30</i>	JOB FINISH <i>11:30</i>
LEASE <i>D. Holt</i>	WELL # <i>6-4</i>	LOCATION <i>Wakeney N70 Galtown Rd C. Graham</i>		COUNTY	STATE	<i>Ks</i>	
OLD OR NEW (Circle one) <u>OLD</u> <i>2 1/4 W. N. Finto</i>							

CONTRACTOR *Murfin* OWNER *Same*

TYPE OF JOB *PTA*

HOLE SIZE T.D. *used 300 SKs*

CASING SIZE *5 1/2* DEPTH

TUBING SIZE *2 1/8* DEPTH *3653'*

DRILL PIPE DEPTH

TOOL DEPTH

PRES. MAX. MINIMUM

MEAS. LINE SHOE JOINT

CEMENT LEFT IN CSG.

PERFS.

DISPLACEMENT

EQUIPMENT

PUMP TRUCK CEMENTER *Alan*

422 HELPER *Wayne*

BULK TRUCK DRIVER *Jerry*

396 DRIVER

BULK TRUCK DRIVER

REMARKS:

653' mix 12 gel mix 50 SKs 60/40 400 gel

in 200 lb HULLS Displace.

2263 mix 100 SKs 60/40 400 gel in 200 lb HULLS

Displace

1240' mix 125 SKs 70 Circ in hole to surface

in 100 lb HULLS

Mix 25 SKs to top off 9th

0-side full

Part for

Along way, Perry

CEMENT

AMOUNT ORDERED *450 SKs 60/40 400 gel*

12 gel 500 lb HULLS on 5782

COMMON @ *13.50* *2430.00*

POZMIX @ *3.55* *906.25*

GEL @ *22* *445.50*

CHLORIDE @

ASC @

Hulls 10 SKs - 500.16 @ 31.05 310.50

HANDLING *487*

MILEAGE *100.54/mi 4*

TOTAL *7135.75*

DEPTH OF JOB

PUMP TRUCK CHARGE *1045.00*

EXTRA FOOTAGE @

MILEAGE *40* @ *7.00* *280.00*

MANIFOLD @

TOTAL *1325.00*

CHARGE TO: *Murfin Drilling Co*

STREET

CITY STATE ZIP

PLUG & FLOAT EQUIPMENT

To Allied Cementing Co., LLC.

You are hereby requested to rent cementing equipment