



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

KANSAS CORPORATION COMMISSION 1168090
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

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

Acch - cc: WF cc: Liz

INVOICE

Invoice Number: 122700
 Invoice Date: May 10, 2010
 Page: 1

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USED FOR

Federal Tax I.D.#: 20-5975804

Customer ID	Well Name# or Customer P.O.	Payment Terms
Murfin	Diebolt #7-2	Net 30 Days
Job Location	Camp Location	Service Date
KS2-03	Russell	May 10, 2010
		Due Date
		6/9/10

Quantity	Item	Description	Unit Price	Amount
240.00	MAT	Class A Common	13.50	3,240.00
160.00	MAT	Pozmix	7.55	1,208.00
15.00	MAT	Gel	20.25	303.75
4.00	MAT	Cottonseed Hulls	31.05	124.20
400.00	SER	Handling	2.25	900.00
30.00	SER	Mileage 400 sx @ .10 per sk per mi	40.00	1,200.00
1.00	SER	Plug to Abandon	875.00	875.00
30.00	SER	Pump Truck Mileage	7.00	210.00

Subtotal	8,060.95
Sales Tax	447.38
Total Invoice Amount	8,508.33
Payment/Credit Applied	
TOTAL	8,508.33

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

\$ 2015 22

ONLY IF PAID ON OR BEFORE
 Jun 4, 2010

3774 511

ALLIED CEMENTING CO., LLC.

041580

Federal Tax I.D.# 20-5975804

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

SERVICE POINT:

Russell KS

DATE <u>5-10-10</u>	SEC. <u>21</u>	TWP. <u>10</u>	RANGE <u>23</u>	CALLED OUT	ON LOCATION	JOB START <u>1:00pm</u>	JOB FINISH <u>2:00pm</u>
LEASE <u>Digbolt</u>	WELL # <u>7-2</u>	LOCATION <u>Wakarusa 9 North to C Rd.</u>		COUNTY <u>Graham</u>	STATE <u>KS</u>		
OLD OR NEW (Circle one) <u>OLD</u>				LOCATION <u>West 1/4 N East into</u>			

CONTRACTOR Murfin

OWNER

TYPE OF JOB PTA

(Used 400sk cement 400 # HULLS)

HOLE SIZE T.D.

CASING SIZE 5 1/2 DEPTH

TUBING SIZE 2 3/8 DEPTH 3328'

DRILL PIPE DEPTH

TOOL DEPTH

PRES. MAX MINIMUM

MEAS. LINE SHOE JOINT

CEMENT LEFT IN CSG.

PERFS.

DISPLACEMENT

EQUIPMENT

PUMP TRUCK CEMENTER John Roberts

417 HELPER Matt

BULK TRUCK DRIVER Glenn

BULK TRUCK DRIVER

DRIVER

COMMON 240 @ 1350 3240.00

POZMIX 160 @ 7.55 1208.00

GEL 15 @ 20.25 303.75

CHLORIDE @

ASC @

Hulls 400# @ 31.05 12420

@

@

@

@

@

@

@

HANDLING 400 @ 2.35 900.00

MILEAGE .100/sk/mile @ 1200.00

TOTAL 6975.95

REMARKS:

Mix 125sk w/ 200 #Hulls @ 3328'
Pull up to 2076 and Mixed 100sk
cement w/ 200 #Hulls Pulled
up to 1086' and Mixed 40sk
cement to circulate to surface
Came out of hole mix 35 sk
down 5 1/2 casing to circulate out 8 1/2
backs'd. Mix 100sk Max 200psi shut
in 100psi.
Thank You!

SERVICE

DEPTH OF JOB

PUMP TRUCK CHARGE 875.00

EXTRA FOOTAGE @

MILEAGE 30 @ 7.00 210.00

MANIFOLD @

@

@



TOTAL 1085.00

CHARGE TO: Murfin

STREET

CITY STATE ZIP

PLUG & FLOAT EQUIPMENT

@

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@

@

To Allied Cementing Co., LLC.

You are hereby requested to rent cementing equipment