



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

KANSAS CORPORATION COMMISSION 1168168
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

Accty -
cc: WF
cc: Liz

INVOICE

Invoice Number: 122521
Invoice Date: Apr 26, 2010
Page: 1

8660 547
APPROVED
P.A 34
J.T.A.

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

Federal Tax I.D.#: 20-5975804

Customer ID	Well Name/# or Customer P.O.	Payment Terms
Murfin	Diebolt Unit #2-3	Net 30 Days
Job Location	Camp Location	Service Date
KS2-03	Russell	Apr 26, 2010
		5/26/10

Quantity	Item	Description	Unit Price	Amount
205.00	MAT	Class A Common	13.50	2,767.50
135.00	MAT	Pozmix	7.55	1,019.25
12.00	MAT	Gel	20.25	243.00
6.00	MAT	Cottonseed Hulls	31.00	186.00
340.00	SER	Handling	2.25	765.00
30.00	SER	Mileage 340 sx @ .10 per sk per mi	34.00	1,020.00
1.00	SER	Plug to Abandon	875.00	875.00
30.00	SER	Pump Truck Mileage	7.00	210.00

Subtotal	7,085.75
Sales Tax	393.26
Total Invoice Amount	7,479.01
Payment/Credit Applied	
TOTAL	7,479.01

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

\$ 1271.44

ONLY IF PAID ON OR BEFORE
May 21, 2010

ALLIED CEMENTING CO., LLC. 041576

Federal Tax I.D.# 20-5975804

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

SERVICE POINT:

Russell KS

DATE <u>4-26-10</u>	SEC. <u>16</u>	TWP. <u>10</u>	RANGE <u>23</u>	CALLED OUT	ON LOCATION	JOB START <u>3:15 pm</u>	JOB FINISH <u>4:00 pm</u>
LEASE <u>Pigbolt unit</u>	WELL # <u>2-3</u>	LOCATION <u>Wakeneey & North to RLC</u>		COUNTY <u>Graham</u>	STATE <u>KS</u>		
<input checked="" type="checkbox"/> OLD OR NEW (Circle one)		LOCATION <u>West 1/4 North East into.</u>					

CONTRACTOR Murfin Drilling

TYPE OF JOB PTA

HOLE SIZE _____ T.D. _____

CASING SIZE 5 1/2 DEPTH _____

TUBING SIZE 2 3/8 DEPTH 2822'

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 Alvin G.B.

BULK TRUCK DRIVER Bob G.B.

_____ DRIVER _____

BULK TRUCK DRIVER _____

OWNER _____

CEMENT (Used 340 sk w/ 600 #Hulls)

AMOUNT ORDERED 450 69/40 4 1/2 Gal

700 #Hulls

COMMON 205 @ 13.00 2767.50

POZMIX 135 @ 7.55 1019.25

GEL 12 @ 20.35 243.90

CHLORIDE @ _____

ASC @ _____

Hulls 600# @ 31.00 186.90

_____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

HANDLING 340 @ 2.25 765.00

MILEAGE .10 d/sk/mile @ _____ 10.20.00

TOTAL 6000.25

REMARKS:

2 3/8 Tubing @ 2822' mixed 100sk cement
tailed by 150 sk cement w/ 600 #Hulls
to circulate cement to surface. Pulled
2 3/8 tubing out of hole. Mixed 90sk
cement down 5 1/2 casing to circulate
out backside & 8 3/8 Shut in w/ 200psi.

Thank You!

SERVICE

DEPTH OF JOB _____

PUMP TRUCK CHARGE _____ 875.00

EXTRA FOOTAGE @ _____

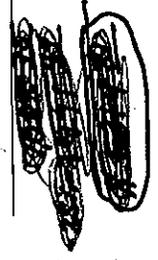
MILEAGE 30 @ 7.00 210.00

MANIFOLD @ _____

_____ @ _____

_____ @ _____

TOTAL 1085.00



CHARGE TO: Murfin Drilling Co

STREET _____

CITY _____ STATE _____ ZIP _____

PLUG & FLOAT EQUIPMENT

@ _____

@ _____

@ _____

@ _____

To Allied Cementing Co., LLC.

You are hereby requested to rent cementing equipment