



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

KANSAS CORPORATION COMMISSION 1168798
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.

(Print Name) Employee of Operator or Operator on above-described well,

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



24 S. Lincoln Street
 P.O. Box 31
 Russell, KS 67665-2906
 Voice: (785) 483-3887
 Fax: (785) 483-5566

Accts —
 cc: WF
 cc: Liz

INVOICE

Invoice Number: 121526
 Invoice Date: Feb 8, 2010
 Page: 1

PA
gpk

Federal Tax I.D.#: 20-5975804

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

Customer ID	Well Name# or Customer P.O.	Payment Terms
Murfin	Diebolt #B-5	Net 30 Days
Job Location	Camp Location	Service Date
KS2-03	Oakley	Feb 8, 2010
		3/10/10

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
10.00	MAT	Gel	20.25	202.50
10.00	MAT	Cottonseed Hulls	31.05	310.50
320.00	SER	Handling	2.25	720.00
40.00	SER	Mileage 320 sx @ .10 per sk per mi	32.00	1,280.00
1.00	SER	Old Hole Plug	875.00	875.00
40.00	SER	Pump Truck Mileage	7.00	280.00

Subtotal	7,004.00
Sales Tax	388.72
Total Invoice Amount	7,392.72
Payment/Credit Applied	
TOTAL	7,392.72

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

\$ 1751.00

ONLY IF PAID ON OR BEFORE
Mar 5, 2010



ALLIEL CEMENTING CO., LLC.

039189

Federal Tax I.D.# 20-5975804

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

SERVICE POINT:

Dakney

DATE <u>2-8-10</u>	SEC <u>33</u>	TWP. <u>10</u>	RANGE <u>20</u>	CALLED OUT	ON LOCATION <u>9:30 Am</u>	JOB START <u>12:00 AM</u>	JOB FINISH <u>11:30 AM</u>	
LEASE <u>Diebolt</u>	WELL# <u>B5</u>	LOCATION <u>wakeoney</u>	<u>9N 1 1/2 W</u>		COUNTY <u>Graham</u>	STATE <u>Ks</u>		
OLD OR NEW (Circle one) <u>OLD</u>				S into				

CONTRACTOR Murfin OWNER same

TYPE OF JOB OHP

CEMENT

AMOUNT ORDERED 300 SKS 6 1/4 489 ec

500# hulls

COMMON 180 SKS @ 13.50 2420.00

POZMIX 120 SKS @ 7.55 906.00

GEL 10 SKS @ 20.25 202.50

CHLORIDE @

ASC @

Hulls 500# 10 SKS @ 31.05 310.50

EQUIPMENT

PUMP TRUCK CEMENTER Andrew

431-281 HELPER Larene

BULK TRUCK DRIVER Ron Bunt

481

BULK TRUCK DRIVER

HANDLING 320 SKS @ 7.25 2220.00

MILEAGE 10 @ sk/mile 1280.00

TOTAL 5899.00

REMARKS:

SPOT 50 SKS @ 1386' thru 2787 ft. bing

Pull to 1085' mix 250 SKS

with 500# hulls. no blow

Took all on vacuum.

SERVICE

DEPTH OF JOB

PUMP TRUCK CHARGE 875.00

EXTRA FOOTAGE @

MILEAGE 40 miles @ 7.00 280.00

MANIFOLD @

TOTAL 1155.00

CHARGE TO: Murfin

STREET

CITY STATE ZIP

PLUG & FLOAT EQUIPMENT

@

@

@

@



24 S. Lincoln Street
 P.O. Box 31
 Russell, KS 67665-2906
 Voice: (785) 483-3887
 Fax: (785) 483-5566

Accty
 cc Liz
 cc WPF

INVOICE

Invoice Number: 121543
 Invoice Date: Feb 9, 2010
 Page: 1

P-A 36
 JTA

Federal Tax I.D.#: 20-5975804

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

Customer ID	Well Name# or Customer P.O.	Payment Terms
Murfin	Diebolt B #5	Net 30 Days
Job Location	Camp Location	Service Date
KS2-03	Russell	Feb 9, 2010
		Due Date
		3/11/10

Quantity	Item	Description	Unit Price	Amount
126.00	MAT	Class A Common	13.50	1,701.00
84.00	MAT	Pozmix	7.55	634.20
7.00	MAT	Gel	20.25	141.75
5.00	MAT	Cottonseed Hulls	31.05	155.25
210.00	SER	Handling	2.25	472.50
40.00	SER	Mileage 210 sx @ .10 per sk per mi	21.00	840.00
1.00	SER	Plug to Abandon	875.00	875.00
40.00	SER	Pump Truck Mileage	7.00	280.00

Subtotal	5,099.70
Sales Tax	283.03
Total Invoice Amount	5,382.73
Payment/Credit Applied	
TOTAL	5,382.73

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

\$ 1874.93

ONLY IF PAID ON OR BEFORE
 Mar 6, 2010

33808

ALLIED CEMENTING CO., LLC.

Federal Tax I.D.# 20-5975804

SERVICE POINT: Russell

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

DATE	2-9-10	SEC	33	TWP.	10	RANGE	23	LOCATION	Wickroy N to Co line	ON LOCATION		JOB START	Wickroy	COUNTY	Crawford	STATE	KS	JOB FINISH	11:30 a.m.
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LEASE Well #6 WELL #6
 OLD OR NEW (Circle one) NEW LOCATION Wickroy N to Co line
 OWNER 11/12w Sinto
 (USED 21055 KRS05) 310115

CONTRACTOR Munshin OWNER 310115
 TYPE OF JOB P.T.A AMOUNT ORDERED 3.50

	T.D.	DEPTH	DEPTH	DEPTH	DEPTH	MINIMUM	SHOE JOINT
HOLE SIZE							
CASING SIZE	<u>5/2</u>						
TUBING SIZE	<u>2 3/8</u>						
DRILL PIPE							
TOOL							
PRES. MAX							
MEAS. LINE							
CEMENT LEFT IN CSG.							
PERFS.							
DISPLACEMENT							

	EQUIPMENT	DRIVER
PUMP TRUCK	CEMENTER <u>Carly</u>	
#	HELPER <u>Matt</u>	
BULK TRUCK	DRIVER <u>Rob</u>	
#	<u>417</u>	
BULK TRUCK	DRIVER	
#		

MILEAGE 012
 HANDLING 012
 TOTAL 045

REMARKS: Inventory at 310115 21055 KRS05 21055 KRS05 21055 KRS05

is warranty is expressly limited to repair, replacement, or allowance for credit, at its option, for any merchandise which is not by ALLIED to be defective. THIS IS THE SOLE WARRANTY OF ALLIED AND NO OTHER WARRANTY IS MADE, EITHER EXPRESS OR OTHERWISE IMPLIED, IN FACT OR IN LAW, INCLUDING ANY WARRANTY AS TO MERCHANTABILITY OR FITNESS FOR A PARTICULAR USE OR PURPOSE, CUSTOMER'S sole and only remedy with respect to any defective merchandise shall be the repair or replacement thereof or allowance for credit as herein provided, and ALLIED shall not be liable for any consequential, special, incidental, or punitive damages resulting from or caused by defective merchandise or supplies.

More specifically:
 1) Nothing in this contract shall be construed as a warranty by ALLIED of the success or the effectiveness of the result of any work or merchandise used, sold, or furnished under this contract.
 2) Nothing in this contract shall be construed as a warranty of the accuracy or correctness of any facts, information, or data furnished by ALLIED, unless the inaccuracy or incorrectness is caused by the willful misconduct or gross negligence of ALLIED or its employees in the preparation or furnishing of such facts, information or data.
 3) Work done by ALLIED shall be under the direct supervision and control of the CUSTOMER or his agent and ALLIED will not be responsible for the job as an independent contractor and not as an employee or agent of the CUSTOMER.

ALLIED'S OBLIGATION