



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

KANSAS CORPORATION COMMISSION 1168845
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

QUALITY OILWELL CEMENTING, INC.

Federal Tax I.D.# 20-2886107

Phone 785-483-2025
Cell 785-324-1041

Home Office P.O. Box 32 Russell, KS 67665

No. 068

Date	11-17-11	Sec.	7	Twp.	22	Range	16	County	Pawnee	State	KS	On Location		Finish	9:30am	
Lease	Eakin			Well No.	6-7			Location	Landed 1w 1s Winto							
Contractor	Sterling Drilling #2							Owner	To Quality Oilwell Cementing, Inc. You are hereby requested to rent cementing equipment and furnish cementer and helper to assist owner or contractor to do work as listed.							
Type Job	Surface							Hole Size	12 1/4	T.D.	1043					
Csg.	8 5/8							Depth	1038							
Tbg. Size								Depth								
Tool								Depth								
Cement Left in Csg.	42.83							Shoe Joint	42.83							
Meas Line								Displace	63 1/4 BCL							
								Cement Amount Ordered	400 60/40 30/60 20/60							

EQUIPMENT

Pumptrk	1	No.	Cementer	Craig	Common	240
			Helper			
Bulktrk		No.	Driver	C.300	Poz. Mix	160
			Driver			
Bulktrk	12	No.	Driver	Michael	Gel.	8
			Driver			
					Calcium	15

JOB SERVICES & REMARKS

Remarks:	Hulls
Rat Hole	Salt
Mouse Hole	Flowseal
Centralizers	Kol-Seal
Baskets	Mud CLR 48
D/V or Port Collar	CFL-117 or CD110 CAF 38

8 5/8 on bottom Est. Circulation.
Mix 400 SCL Displace Plug.
Cement Circulated.
Float Held Avg Landed @
800#.

FLOAT EQUIPMENT

Guide Shoe	8 5/8
Centralizer	
Baskets	
AFU Inserts	1 Rubber Plug
Float Shoe	
Latch Down	

Pumptrk Charge	Long Surface
Mileage	31

Tax	
Discount	
Total Charge	

X Signature

/

ALLIED CEMENTING CO., LLC. 037314

Federal Tax I.D.# 20-5975804

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

SERVICE POINT:

Great Bend

DATE <u>11-28-11</u>	SEC. <u>7</u>	TWP. <u>22S</u>	RANGE <u>16W</u>	CALLED OUT	ON LOCATION	JOB START <u>12:00 PM</u>	JOB FINISH <u>1:00 PM</u>
LEASE <u>EAMW</u>	WELL# <u>6-7</u>	LOCATION <u>handed US 1 west</u>			COUNTY <u>Rawl</u>	STATE <u>KS</u>	
OLD OR NEW (Circle one):		<u>South into</u>					

CONTRACTOR <u>Starling Rig 2</u>	OWNER <u>Captive II</u>
TYPE OF JOB <u>Rotary Plug</u>	
HOLE SIZE <u>7 7/8</u>	T.D. <u>4511</u>
CASING SIZE	DEPTH
TUBING SIZE	DEPTH
DRILL PIPE <u>4 1/2</u>	DEPTH <u>3850</u>
TOOL	DEPTH
PRES. MAX	MINIMUM
MEAS. LINE	SHOE JOINT
CEMENT LEFT IN CSG.	
PERFS.	
DISPLACEMENT	

CEMENT	AMOUNT ORDERED	<u>210 5x 60/40 + 4% Gel</u>
		<u>+ .25 flo seal</u>
COMMON	<u>126</u>	@ <u>16.25</u> <u>2047.50</u>
POZMIX	<u>84</u>	@ <u>8.50</u> <u>714.00</u>
GEL	<u>7</u>	@ <u>21.25</u> <u>148.75</u>
CHLORIDE		@
ASC		@
<u>flo seal</u>	<u>52</u>	@ <u>2.70</u> <u>140.40</u>
		@
		@
		@
		@
		@
		@
HANDLING	<u>219</u>	@ <u>2.25</u> <u>492.75</u>
MILEAGE	<u>219 & 214.11</u>	<u>505.82</u>
		TOTAL <u>4049.22</u>

EQUIPMENT

PUMP TRUCK	CEMENTER <u>Wayne</u>
# <u>366</u>	HELPER <u>Dustin</u>
BULK TRUCK	
# <u>391</u>	DRIVER <u>Jimmy</u>
BULK TRUCK	
#	DRIVER

REMARKS:

- 1st Plug 3850 mix 50SX
- 2nd Plug 1050 mix 50SX
- 3rd Plug 400 mix 40SX
- 4th Plug 60 mix 20SX
- 5th Plug mouse mix 20SX
- 6th Plug Rat mix 20SX

SERVICE

DEPTH OF JOB	<u>3850</u>	
PUMP TRUCK CHARGE		<u>1250.00</u>
EXTRA FOOTAGE		@
MILEAGE <u>Hum</u>	<u>42</u>	@ <u>7.00</u> <u>294.00</u>
MANIFOLD		@
<u>Hum</u>	<u>42</u>	@ <u>4.00</u> <u>168.00</u>
		@

TOTAL 1712.00

PLUG & FLOAT EQUIPMENT

	@	
	@	
	@	
	@	
	@	
		TOTAL

CHARGE TO: Captive
STREET _____
CITY _____ STATE _____ ZIP _____

To Allied Cementing Co., LLC.
You are hereby requested to rent cementing equipment and furnish cementer and helper(s) to assist owner or contractor to do work as is listed. The above work was done to satisfaction and supervision of owner agent or contractor. I have read and understand the "GENERAL TERMS AND CONDITIONS" listed on the reverse side.

SALES TAX (if Any) _____

TOTAL CHARGES 5,761.29

DISCOUNT 10% 20% 1,636.20

IF PAID IN 30 DAYS

PRINTED NAME Shane Downs

SIGNATURE [Signature]

4125.09