

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

the same are true and correct, so help me God.

## KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

## 1169625

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 #:					API No. 15 -					
Name:					Spot Description:					
Address 1:					Sec Twp S. R East West					
Address 2:					Feet from North / South Line of Section					
City:					Feet from East / West Line of Section					
Contact Person:					Footages Calculated from Nearest Outside Section Corner:					
Phone: ( )				NE NW SE SW						
Type of Well: (Check one)	Oil Well Gas Well	OG D&A Cathod	ic C							
Water Supply Well	Other:	SWD Permit #:		Lease Name: Well #:						
ENHR Permit #:	Gas Sto	rage Permit #:				7701111.				
Is ACO-1 filed? Yes	No If not, is well	log attached? Yes		The plugging proposal was approved on: (Date)						
Producing Formation(s): List	All (If needed attach another	sheet)	b	by: (KCC <b>District</b> Agent's Name) Plugging Commenced:						
Depth to	o Top: Botto	m: T.D								
Depth to	o Top: Botto	m: T.D		Plugging Completed:						
Depth to	o Top: Botto	m:T.D	'	luggiii	g completed.					
Show depth and thickness of	all water, oil and gas forma	ations.								
Oil, Gas or Wate	r Records		Casing Record (Surface, Conductor & Production)							
Formation	Content	Casing	Size		Setting Depth	Pulled Out				
cement or other plugs were u	sed, state the character of	same depth placed from (bot	ttom), to (top)	) for ea	ach plug set.					
Plugging Contractor License #:										
Address 1:			Address 2:							
City:			S	tate: _		Zip:+				
Phone: ( )										
Name of Party Responsible for	or Plugging Fees:									
State of	County, _		,	SS.						
(Print Name)				E	Employee of Operator or	Operator on above-described well,				

Submitted Electronically

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

## ALLIED CEMENTING CO., LLC. 034076 Federal Tax I.D.# 20-5975804

REMIT TO P.O. B	OX 31	NSAS 6766	m Allied Cema	SERVICE POINT:							
ces described on effe	iviox odi o	b" relates to					d by west	refer to like pa			
DATE /2-28 -20	SEC.	TWP.	RANGE 20 w	ens of t	ALLED OUT	ON LOCATION	JOB START	JOB FINISH			
LEASE LAS AGE	WELL#	B -2	LOCATION	DIF	en established. C	de La GANA	COUNTY	STATE			
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CHARGE TO: B	ACK T	JAMONIA	OilI	HOURS BEE		gab or, in the case c					
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CITY	ST	ATE	ZIP	estremb a							
						PLUG & FLOAT	EQUIPMEN	caused by con			
								WARRANTE			
To Allied Comen	ting Co	IIC					a (a) zi vinst				

You are hereby requested to rent cementing equipment