



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

KANSAS CORPORATION COMMISSION 1183327
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

ALLIED CEMENTING CO., LLC. 34338

Federal Tax I.D.# 20-5975804

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

SERVICE POINT:

Medicine Lake, KS
5-24 5-24

DATE <u>6-23-09</u>	SEC. <u>5</u>	TWP. <u>29s</u>	RANGE <u>13W</u>	CALLED OUT <u>8:00 pm</u>	ON LOCATION <u>11:00 pm</u>	JOB START <u>2:00 pm</u>	JOB FINISH <u>3:00 pm</u>
LEASE <u>meigs trust</u>	WELL # <u>1-5</u>	LOCATION <u>Pratt, ks, 7 south</u>			COUNTY <u>Pratt</u>	STATE <u>KS</u>	
OLD OR <u>NEW</u> (Circle one)			<u>1 3/4 west, N into</u>				

CONTRACTOR Sterlin #5

TYPE OF JOB Surface

HOLE SIZE 17 1/2 T.D. 260

CASING SIZE 13 3/8 DEPTH 255

TUBING SIZE _____ DEPTH _____

DRILL PIPE _____ DEPTH _____

TOOL _____ DEPTH _____

PRES. MAX _____ MINIMUM _____

MEAS. LINE _____ SHOE JOINT _____

CEMENT LEFT IN CSG. 20'

PERFS. _____

DISPLACEMENT 36 1/2 bbls of fresh water

OWNER Shelby Resources LLC

CEMENT

AMOUNT ORDERED 250sx 60' 40' 3 & 2

COMMON	<u>150 sx</u>	@	<u>13.50</u>	<u>2,025.00</u>
POZMIX	<u>100 sx</u>	@	<u>7.55</u>	<u>755.00</u>
GEL	<u>4 sx</u>	@	<u>20.25</u>	<u>81.00</u>
CHLORIDE	<u>8 sx</u>	@	<u>51.50</u>	<u>412.00</u>
ASC		@		
		@		
		@		
		@		
		@		
		@		
		@		
HANDLING	<u>250 sx</u>	@	<u>2.25</u>	<u>562.50</u>
MILEAGE	<u>250 x .10 x 7 =</u>			<u>300.00</u>
TOTAL				<u>4,135.50</u>

EQUIPMENT

PUMP TRUCK CEMENTER Derin F.

352 HELPER Denny W.

BULK TRUCK

344/170 DRIVER Randy

BULK TRUCK

_____ DRIVER Douglas F.

REMARKS:

Pipe on bottom & break circulation
Pump 5 bbls of fresh water check
mix 250sx of cement, Displace
36 1/2 bbls & shut in, cement
did Circulate

SERVICE

DEPTH OF JOB	<u>255</u>			
PUMP TRUCK CHARGE				<u>\$ 991.00</u>
EXTRA FOOTAGE		@		
MILEAGE	<u>7</u>	@	<u>2.00</u>	<u>49.00</u>
MANIFOLD		@		
	<u>Shredded & used</u>	@		
		@		

CHARGE TO: Shelby Resources LLC

STREET _____

CITY _____ STATE _____ ZIP _____

TOTAL 1,040.00

PLUG & FLOAT EQUIPMENT

	@		
	@		
<u>none</u>	@		
	@		
	@		

To Allied Cementing Co., LLC.
You are hereby requested to rent cementing equipment
and furnish cementer and helper(s) to assist owner or

