

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

KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION WELL PLUGGING RECORD K.A.R. 82-3-117

Form CP-4 December 2003 Type or Print on this Form Form must be Signed All blanks must be Filled

Lease Operator: Blake Exploration LLC

Address: 201 S. Main P.O. Box 150 Bogue KS,

Phone: (785) 421-2921 Operator License #: 33306

Type of Well: Oil Docket #: (Oil, Gas D&A, SWD, ENHR, Water Supply Well, Cathodic, Other) (If SWD or ENHR)

The plugging proposal was approved on: 6-19-2013 (Date)

by: Roy Dinkel (KCC District Agent's Name)

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.

API Number: 15-109-21881-00-00

Lease Name: Wait

Well Number: 1

Spot Location (QQQQ): SW - NE - NW - NE 335 Feet from North / South Section Line

1800 Feet from East / West Section Line

Sec. 31 Twp. 13 S. R. 32 East West

County: Logan

Date Well Completed: 6-19-2013 @ 1:30 PM

Plugging Commenced: 4:15 AM, 6-20-2013

Plugging Completed: 7:45 AM, 6-20-2013

Show depth and thickness of all water, oil and gas formations.

Table with columns: Oil, Gas or Water Records (Formation, Content) and Casing Record (Surface Conductor & Production) (From, To, Size, Put In, 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.

Plug @ 2428' w/ 25sx @ 1400' w/ 100sx @ 276" w/ 40sx @ 40' w/ 10sx 30sx In Rat 15sx In Mouse. Cement w/ 220sx 6 3/4 40 Poz 4% bel 1/4 # Flaseal Consolidated Cement

Name of Plugging Contractor: Val Energy Inc. License #:

Address:

Name of Party Responsible for Plugging Fees:

State of County, ss.

(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.

(Signature) [Signature] (Address) 1226 Harrison St Bend KS

SUBSCRIBED and SWORN TO before me this day of 20

My Commission Expires: Notary Public

Mail to: KCC - Conservation Division, 130 S. Market - Room 2078, Wichita, Kansas 67202

FIELD TICKET & TREATMENT REPORT
CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
6-13-12	1487	Walt #1	31	135	32W	Logan
CUSTOMER		Oakley South to Mustang Rd west to 410 IN west into	TRUCK #	DRIVER	TRUCK #	DRIVER
MAILING ADDRESS			405	Jordan L		
CITY			506	M. Ho P		
STATE						
ZIP CODE						

JOB TYPE Surf HOLE SIZE 12 1/4" HOLE DEPTH 230' CASING SIZE & WEIGHT 8 5/8 24#
 CASING DEPTH 220' DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT 14.8 SLURRY VOL 1.36 WATER gal/sk _____ CEMENT LEFT in CASING 20'
 DISPLACEMENT 13 bbls DISPLACEMENT PSI _____ MIX PSI _____ RATE _____

REMARKS: Safety meeting and rig up on Vol drilling #4 Circulate casing mix 225 SWS common class A cement with 3% calcium chloride displaced 13 bbls water shut in cement and circulate 7 bbls to pit

Thanks Mike & crew

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5405	1	PUMP CHARGE	1150. ⁰⁰	1150. ⁰⁰
5406	20	MILEAGE	5.25	105. ⁰⁰
5407	10.57 TONS	Ton Mileage Delivery	430. ⁰⁰	430. ⁰⁰
11045	225 SWS	Common class A cement	18.55	4173.75
1102	634 #	Calcium chloride	.94	595.96
11183	423 #	Bentonite gel	.27	114.21
			Subtotal	6568.92
			Less 108 discount	656.89
			Subtotal	5912.00
			SALES TAX	
			ESTIMATED TOTAL	

Ravin 8737

AUTHORIZATION [Signature] TITLE _____ DATE _____

I acknowledge that the payment terms, unless specifically amended in writing on the front of the form or in the customer's account records, at our office, and conditions of service on the back of this form are in effect for services identified on this form.



CONSOLIDATED
Oil Well Services, LLC

TICKET NUMBER 40020
LOCATION Oakley, KS
FOREMAN Kelly Gabel

PO Box 884, Chanute, KS 66720
620-431-9210 or 800-467-8676

FIELD TICKET & TREATMENT REPORT
CEMENT

KS

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
6-20-13	1487	Wait #1	31	13	32	Logan
CUSTOMER Blake Exploration		Oakley South to Mustang Rd 368 1N Winto	TRUCK #	DRIVER	TRUCK #	DRIVER
MAILING ADDRESS			399	Jordan		
CITY		STATE	ZIP CODE			

JOB TYPE PA HOLE SIZE 7 7/8 HOLE DEPTH 4619 CASING SIZE & WEIGHT _____
 CASING DEPTH _____ DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT 142 SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING _____
 DISPLACEMENT _____ DISPLACEMENT PSI _____ MIX PSI _____ RATE _____

REMARKS: Safety meeting, rigged up on Wait #4, mixed cement
plugs & displaced.
25 @ 2438
100 @ 1400
40 @ 276
10 @ 40
30RH
15MH
washed out pumps & lines rigged down

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5405N	1	PUMP CHARGE	1305 ⁰⁰	1395 ⁰⁰
5406	20mi	MILEAGE	535	105 ⁰⁰
1131	2205Ks	60/40 P02	1586	3589 ²⁰
1118B	757#	Bentonite	.27	204 ³⁹
1107	55#	F10-5091	297	163 ³⁵
5407	9.46	Ton mileage delivery	175	430 ⁰⁰
4432	1	8 5/8 Wooden Plug	100 ⁷⁵	100 ⁷⁵
				5887 ⁶⁴
			Lead 1070	588 ⁷²
				5298 ⁴²
			SALES TAX	
			ESTIMATED	
			TOTAL	

Ravin 3737

AUTHORIZATION [Signature]

TITLE _____

DATE 6-20-13

I acknowledge that the payment terms, unless specifically amended in writing on the front of the form or in the customer's account records, at our office, and conditions of service on the back of this form are in effect for services identified on this form.