



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

KANSAS CORPORATION COMMISSION 1177742
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

Global Cementing LLC dba SOS LLC

Invoice

18048 I-70 Road
Russell, KS 67665

Date	Invoice #
12/19/2013	1176

Bill To
CULBREATH OIL & GAS CO INC 1532 S PEORIA AVE TULSA,OK 74120

P.O. No.	Terms	Project
MINIUM 1-4	Net 30	

Quantity	Description	Rate	Amount
204	COMMON	15.50	3,162.00T
136	POZ	8.50	1,156.00T
12	GEL	23.50	282.00T
352	HANDLING	2.10	739.20
	BULK MILEAGE	1,014.00	1,014.00
1	TRI-PLEX PUMP CHARGE FOR PTA PLUG	1,200.00	1,200.00
72	PUMP TRUCK MILEAGE	6.50	468.00
72	PICKUP	2.50	180.00
6	HULLS	45.00	270.00T
12	GEL	23.50	282.00T
	DEDUCT 15% FROM TOTAL IF PAID WITHIN 30 DAYS OF INVOICE		
	"DAN" CO	8.30%	427.62

Thank you for your business.

Phone #	Fax #	E-mail
785-324-2658	785-445-3526	

Total \$9,180.82

SCHIPPER'S OIL FIELD SERVICES, L.L.C.

1176

REMIT TO 18048 170RD
RUSSELL, KS 67665

SERVICE POINT: Russell, KS - Home, KS

DATE <u>12-19-13</u>	SEC.	TWP.	RANGE	CALLED OUT	ON LOCATION	JOB START <u>12:30pm</u>	JOB FINISH <u>1:30pm</u>
LEASE <u>Minimum</u>	WELL #. <u>1-4</u>	LOCATION			COUNTY <u>Shoedan</u>	STATE <u>KS</u>	
<input checked="" type="radio"/> OLD OR NEW (CIRCLE ONE)							

CONTRACTOR Fc 721er
 TYPE OF JOB PTA
 HOLE SIZE _____ T.D. _____
 CASING SIZE 5/8 DEPTH _____
 TUBING SIZE 2 3/8 DEPTH 3805
 DRILL PIPE _____ DEPTH _____
 TOOL _____ DEPTH _____
 PRES. MAX 1400ps' MINIMUM 300ps'
 MEAS. LINE _____ SHOE JOINT _____
 CEMENT LEFT IN CSG. _____
 PERFS _____
 DISPLACEMENT _____
 EQUIPMENT _____
 PUMP TRUCK CEMENTER Heath
 # P1 HELPER Cody
 BULK TRUCK DRIVER Mark
 # B3
 BULK TRUCK DRIVER _____
 # _____

OWNER _____
 CEMENT AMOUNT ORDERED 340sr 60/40 4%gel
 COMMON _____ @ _____
 POZMIX _____ @ _____
 GEL _____ @ _____
 CHLORIDE _____ @ _____
 ASC _____ @ _____
 _____ @ _____
 _____ @ _____
 _____ @ _____
 _____ @ _____
 HANDLING _____ @ _____
 MILEAGE _____ @ _____
 TOTAL _____

REMARKS:
1st Plug @ 3805 = 80sr = 12sr gel = 200# hulls
2nd Plug @ 2190 = 110sr
3rd Plug @ 1100 = 135sr and Circulated
Came out of hole and top off casing with
10 sr
Pressure up back side to 300ps' with 5 sr
of cement

CHARGE TO: Culbreath Oil & Gas
 STREET _____
 CITY _____ STATE _____ ZIP _____

Schippers Oil Field Services, L.L.C.,
 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.

PRINTED NAME _____
 SIGNATURE [Signature]

SERVICE
 DEPTH OF JOB _____
 PUMP TRUCK CHARGE _____
 EXTRA FOOTAGE _____ @ _____
 MILEAGE _____ @ _____
 MANIFOLD _____ @ _____
 _____ @ _____
 _____ @ _____
 TOTAL _____

PLUG & FLOAT EQUIPMENT
300# hulls @ _____
 _____ @ _____
12sr gel @ _____
 _____ @ _____
 _____ @ _____
 TOTAL _____

SALES TAX (If Any) _____
 TOTAL CHARGES _____
 DISCOUNT _____ IF PAID IN 30 DAYS

ALLIED OIL & GAS SERVICES, LLC 060119

Federal Tax I.D. # 20-8651475

REMIT TO P.O. BOX 93999
SOUTHLAKE, TEXAS 76092

SERVICE POINT:

Dakley

DATE <u>3-3-13</u>	SEC. <u>4</u>	TWP. <u>9</u>	RANGE <u>26</u>	CALLED OUT	ON LOCATION	Bottom Top Bottom Top	JOB START	JOB FINISH
LEASE <u>minium</u>	WELL # <u>1-4 owwo</u>	LOCATION <u>Quinter 14N 1E 2N</u>			COUNTY <u>Sheridan</u>	STATE <u>KS</u>	<u>2:00 PM</u>	<u>2:50 PM</u>
OLD OR <u>NEW</u> (Circle one)	<u>1/2 W N + W into</u>							

CONTRACTOR maverick 108
 TYPE OF JOB Production (2 stage)
 HOLE SIZE 2 7/8 T.D. 3960'
 CASING SIZE 5 1/2 DEPTH 3949.97'
 TUBING SIZE DEPTH
 DRILL PIPE DEPTH
 TOOL DV DEPTH 2140'
 PRES. MAX MINIMUM
 MEAS. LINE SHOE JOINT 42.04
 CEMENT LEFT IN CSG. 42.04
 PERFS. bottom water mud TOP
 DISPLACEMENT 42.07 50.93 50.93

OWNER Same
 CEMENT
 AMOUNT ORDERED 175 sks ASC 100 salt 2109.1
435 sks Lite 1/4" flo-seal
~~27 BBL super flush 29 gal Cla-pro~~
 COMMON @
 POZMIX @
 GEL 3 sks @ 23.40 70.20
 CHLORIDE @
 ASC 125 sks @ 20.90 2615.50
 salt 18 sks @ 26.35 474.30
 Lite 435 sks @ 15.95 6938.25
 Flo-seal 36# @ 2.97 108.75
 super flush 29 BBL @ 58.20 1408.80
 Cla-pro 29 gal @ 34.40 68.80
 HANDLING 698.44 gal/ft @ 2.48 1732.13
 MILEAGE 2.60 ton/mile 29.58 ton 3845.40
 TOTAL 18324.13

EQUIPMENT

PUMP TRUCK CEMENTER Andrew Forstner
 # 431 HELPER Dave Keteleff
 BULK TRUCK
 # 396 DRIVER David Scariano
 BULK TRUCK
 # 404 DRIVER ty Schrock

REMARKS:

Pump 12 BBL super flush, 2000 gal water, followed by 125 sks ASC, wash pump and line clean. Release plug start displacement with water, pump 12 BBL water 52 BBL mud, 700' lift, plug lands 1400'. Float held, open DV tool 1000', pump 12 BBL super flush, plug mouse hole 15 sks Rathole 30 sks, mix cement down 5 1/2 casing, wash pump and line clean, release plug and start displacement 500' lift and plug 1500' tool closed cement circulated. Thank you

SERVICE

DEPTH OF JOB 3949.97' bottom top
 PUMP TRUCK CHARGE 2558.25 2466.25
 EXTRA FOOTAGE @
 MILEAGE 50 miles @ 7.20 385.00
 MANIFOLD head @ 275.00
 Light vehicle @ 4140 2201.80
 TOTAL 5845.00

CHARGE TO: Culbreath oil + Gas
 STREET _____
 CITY _____ STATE _____ ZIP _____

PLUG & FLOAT EQUIPMENT

5 1/2
 1 Aff float shoe @ 408.33
 1 latch down plug Assy @ 324.09
 1 DV tool @ 5335.26
 2 Baskets @ 394.29 788.58
 10 centralizers @ 57.33 573.30
 40 Recepticating scratches 46.00 1840.00
 TOTAL 9269.56

To: Allied Oil & Gas Services, 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.

PRINTED NAME _____
 SIGNATURE Paul Bellomo

SALES TAX (if Any) _____
 TOTAL CHARGES 33418.69
 DISCOUNT 7,686.29 IF PAID IN 30 DAYS
25,732.39 net.