



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

KANSAS CORPORATION COMMISSION 1193511
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



INVOICE

DATE	INVOICE #
12/16/2013	4439

BILL TO
SANDRIDGE ENERGY, INC. ATTN: PURCHASING MANAGER 123 ROBERT S. KERR AVENUE OKLAHOMA CITY, OK 73102

REMIT TO
EDGE SERVICES, INC. PO BOX 609 WOODWARD, OK 73802

COUNTY	STARTING D...	WORK ORDER	RIG NUMBER	LEASE NAME	Terms
CLARK, KS	12/11/2013	3390	TOMCAT 2	CARROLL 3023 1-31	Due on rec ..

Description

DRILLED 80' OF 30" CONDUCTOR HOLE
 DRILLED 6' OF 76" HOLE
 FURNISHED AND SET 6' X 6' TINHORN CELLAR
 FURNISHED 80' OF 20" CONDUCTOR PIPE
 FURNISHED 35" RAT HOLE SHUCK
 FURNISHED 25" MOUSE HOLE SHUCK
 FURNISHED MUD, WATER, AND TRUCKING
 FURNISHED WELDER AND MATERIALS
 FURNISHED 9 YARDS OF GRADE A CEMENT
 FURNISHED GROUT PUMP
 DRILL RAT AND MOUSE HOLES

TOTAL BID \$14,500.00

Sales Tax (7.8%)	\$169.42
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TOTAL	\$14,669.42
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JOB SUMMARY			PROJECT NUMBER SOK 3302	TICKET DATE 12/31/13
COUNTY Clark	State Kansas	COMPANY Bridge Exploration & Produc	CUSTOMER REP Bill Tomlinson	
LEASE NAME Carroll 3023	Well No. 1-31	JOB TYPE Surface	EMPLOYEE NAME Bryan Douglas	

EMP NAME	Bryan Douglas				
	Jared Green				
	Rocky Anthis				
	Aurthur Setzer				

Form. Name _____ Type: _____

Packer Type _____ Set At **0**

Bottom Hole Temp. **80** Pressure _____

Retainer Depth _____ Total Depth **1230**

Date	Called Out	On Location	Job Started	Job Completed
	12/31/2013	12/31/2013	12/31/2013	12/31/2013
Time	0200	0800	1500	1700

Tools and Accessories		
Type and Size	Qty	Make
Auto Fill Tube	0	IR
Insert Float Va	0	IR
Centralizers	0	IR
Top Plug	0	IR
HEAD	0	IR
Limit clamp	0	IR
Weld-A	0	IR
Texas Pattern Guide Shoe	0	IR
Cement Basket	0	IR

Well Data						
	New/Used	Weight	Size	Grade	From	To
Casing		36#	9 1/4"		Surface	1,230
Liner						
Liner						
Tubing			0			
Drill Pipe						
Open Hole			12 1/4"		Surface	1,230
Perforations						Shots/Ft.
Perforations						
Perforations						

Materials			
Mud Type	WBM	Density	9 Lb/Gal
Disp. Fluid	Fresh Water	Density	8.33 Lb/Gal
Spacer type	Fresh Water	BBL.	10 8.33
Spacer type		BBL.	
Acid Type		Gal.	%
Acid Type		Gal.	%
Surfactant		Gal.	In
NE Agent		Gal.	In
Fluid Loss		Gal/Lb	In
Gelling Agent		Gal/Lb	In
Fric. Red.		Gal/Lb	In
MISC.		Gal/Lb	In

Hours On Location		Operating Hours		Description of Job
Date	Hours	Date	Hours	
12/31	9.0	12/31	2.0	Surface
Total	9.0	Total	2.0	

Pressures			
MAX	1,500 PSI	AVG.	400
Average Rates in BPM			
MAX	6 BPM	AVG	5
Cement Left in Pipe			
Feet	43	Reason	SHOE JOINT

Cement Data						
Stage	Sacks	Cement	Additives	W/Rq.	Yield	Lbs/Gal
1	490	TEX Lite Premium Plus 65	(6% Gel) 2% Calcium Chloride - 1/4 pps Cello-Flake - .5% C-41P	11.11	2.01	12.40
2	195	Premium Plus (Class C)	2% Calcium Chloride - 1/4 pps Cello-Flake	6.32	1.32	14.80
3	*200	Premium Plus (Class C)	*2% Calcium Chloride on side to use if necessary	*6.32	*1.32	*14.8

Summary					
Preflush	<input type="text"/>	Type:	Fresh Water		
Breakdown		MAXIMUM	1,500 PSI	Preflush: BBI	10.00
		Lost Returns-l	NO/FULL	Load & Bkdn: Gal - BBI	N/A
		Actual TOC	SURFACE	Excess /Return BBI	50
Average		Bump Plug PSI:	900	Calc. TOC:	SURFACE
ISIP	5 Min.	10 Min	15 Min	Final Circ. PSI:	400
				Cement Slurry BBI	221.3
				Total Volume BBI	322.25

CUSTOMER REPRESENTATIVE Bill Tomlinson SIGNATURE

JOB SUMMARY			PROJECT NUMBER SOK 3317	TICKET DATE 01/08/14
COUNTY Clarke	State Kansas	COMPANY Bridge Exploration & Produc	CUSTOMER REP Bill Tomlinson	
LEASE NAME Carroll 3023	Well No. 1-31	JOB TYPE Plug to Abandon	EMPLOYEE NAME marcos quintana	

EMP NAME					
louis arney	0				
marcos quintana					
daniel tewell					
mike chalfang					

Form. Name _____ Type: _____

Packer Type _____ Set At ~1,530'

Bottom Hole Temp. 95 Pressure _____

Retainer Depth _____ Total Depth 0

	Called Out	On Location	Job Started	Job Completed
Date	1/7/2014	1/7/2014	1/7/2014	1/8/2014
Time	1200	1730	2000	115

Tools and Accessories		
Type and Size	Qty	Make
Auto Fill Tube	0	IR
Insert Float Val	0	IR
Centralizers	0	IR
Top Plug	0	IR
HEAD	0	IR
Limit clamp	0	IR
Weld-A	0	IR
Texas Pattern Guide Shoe	0	IR
Cement Basket	0	IR

Well Data						
	New/Used	Weight	Size Grade	From	To	Max. Allow
Casing		36#	9 5/8"	Surface	0	1,500
Liner						
Liner			4 1/2"			
Tubing						
Drill Pipe						
Open Hole			4" & 9 5/8" C	Surface	0	Shots/Ft.
Perforations						
Perforations						
Perforations						

Materials			
Mud Type	WBM	Density	9 Lb/Gal
Disp. Fluid	Fresh Water	Density	8.33 Lb/Gal
Spacer type	resh Water BBL.		10 8.33
Spacer type	BBL.		
Acid Type	Gal.	%	
Acid Type	Gal.	%	
Surfactant	Gal.	ln	
NE Agent	Gal.	ln	
Fluid Loss	Gal/Lb	ln	
Gelling Agent	Gal/Lb	ln	
Fric. Red.	Gal/Lb	ln	
MISC.	Gal/Lb	ln	

Hours On Location		Operating Hours		Description of Job
Date	Hours	Date	Hours	
1/7	7.5	1/8	3.0	Plug to Abandon
1/8	1.3			
Total 8.8		Total 3.0		

Perfpac Balls _____ Qty. _____

Other _____

Other _____

Other _____

Other _____

Pressures	
MAX 1,500 PSI	AVG. 100
Average Rates in BPM	
MAX 6 BPM	AVG 4
Cement Left in Pipe	
Feet 0	Reason SHOE JOINT

Cement Data						
Stage	Sacks	Cement	Additives	W/Rq.	Yield	Lbs/Gal
1	255	EX Lite Premium Plus 60	4% Gel			
2	0	0		0	0.00	0.00
3	0	0		0	0.00	0.00

Summary			
Preflush Breakdown	Type: _____	Preflush: BBI	10.00
	MAXIMUM 1,500 PSI	Load & Bkdn: Gal - BBI	N/A
	Lost Returns-N	Excess /Return BBI	20
	Actual TOC	Calc. TOC:	SURFACE
Average	Bump Plug PSI:	Final Circ. PSI:	0
ISIP 5 Min.	10 Min.	Cement Slurr: BBI	48.0
	15 Min.	Total Volume BBI	77.00

CUSTOMER REPRESENTATIVE *X* Bill Tomlinson SIGNATURE