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

1197765

March 2009 Type or Print on this Form Form must be Signed All blanks must be Filled

Form CP-4

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: State: Zip: +	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 Cathodic Water Supply Well Other: SWD Permit #: SWD Permit #: SWD Permit #: ENHR Permit #: Gas Storage Permit #: Gas Storage Permit #: SWD Permit #: SWD 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) SWD Permit #: SWD Per	County: Well #: Uell #: Date Well Completed: (Date) The plugging proposal was approved on: (Date)
Depth to Top: Bottom: T.D	by: (KCC District Agent's Name)
Depth to Top: Bottom: Depth to Top: Bottom: Depth to Top: Bottom:	Plugging Commenced:

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

Oil, Gas or Water	Records	Casing Record (Surface, Conductor & Production)				
Formation	Formation Content		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:	Name:						
Address 1:		Address 2:							
City:		State:	Zip: +						
Phone: ()									
Name of Party Responsible for Plugging	g Fees:								
State of	County,	, SS.							
	(Print Name)		or or Operator on above-described well						
haing first duly sugars an eath source. The	at I have knowledge of the factor	totomonto, and mottors harain contained, and the la	a of the choice described well is so filed on						

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

OPELAND

POST OFFICE BOX 438 HAYSVILLE, KS 67060 (316) 524-1225 (316) 524-1027 FAX

Acid & Cement

BILL TO:

BURRTON, KS (620) 463-5161 FAX (620) 463-2104

GREAT BEND, KS (620) 793-3366 FAX (620) 793-3536

FEP 28 2014

Invoice

INVOICE NUMBER: C40317-IN

LEASE: YOUNG 2

VESS OIL CORP 1700 WATERFRONT PARKWAY BLDG 500 WICHITA, KS 67206

DATE	ORDER SALESMAN ORDER DATE PURCHASE			ORDER	SPECIAL INSTRUCTIONS				
02/27/2014	C40317		02/24/2014			NET 30			
QUANTITY U/M ITEM NO./DESCRIPTION					D/C	PRICE	EXTENSION		
45.00	м	CEMENT MILEA	GE PUMP TRUCK		0.00	4.00	180.00		
45.00	MI	CEMENT MILEA	GE PU TRUCK		0.00	2.00	90.00		
1.00	EA	CEMENT PUMP	CHARGE		0.00	650.00	650.00		
205.00	SAX ,	60-40 POZ MIX	2% GEL		0.00	9.25	1,896.25		
4.00	SAX	2% ADDITIONAL	. GEL		0.00	22.00	88.00		
209.00	EA	BULK CHARGE			0.00	1.25	261.25		
413.82	ML	BULK TRUCK -	TON MILES		0.00	1.10	455.20		
			÷						
					· · .				
REMIT TO: P.O. BOX 438 HAYSVILLE, KS 67060 RECEIVED BY		СОР		Net Invoice: KINCO Sales Tax: Invoice Total:		3,620.70			
		FUEL SURCHARGE IS NOT TAXABLE AND IS ADDED TO MILEAGE, PUMP AND OR DELIVERY CHARGES ONLY.				44.8			

There will be a charge of 1.5% "per month" (18% annual rate) on all accounts over 30 days past due.

Copeland Acid & Cement is a subsidiary of Gressel Oil Field Service

Gressel Oil Field Service reserves a security interest in the goods sold until the same are paid for in full and reserve all the rights of a secured party under the Uniform Commercial Code.

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Cement ??	

TREATMENT REPORT

	Cement	251							Acid Stage No	».	
					Type Treatment:	Amt	Tvr	e Fluid	Sand Size	Pound	ls of Sand
· 2	/24/2014 06	strict	F.O. N	o. 40317	Bkdown		I./Gal.				
	VESS OIL						I./Gal.				
	& No. YOUNG #	±7			{		l./Gəl.				
	ano. TOONG F	12	Fleid	····	1		I./Gal.			·	
					 Flush	8b	./Gal.				· · · · · ·
inty	KINGIVIAN		State KS	ang ang pang pang pang ang ang ang ang ang ang ang ang ang	4		I./Gal.				
					Treated from					No. ft	
ing:				Set atft.			<u> </u>			No. ft No. ft.	
mation:			Perf		from				Π.	NO. IL.	ana tarihi kana kandina da kata
mation:			Perf	to	Actual Volume of O)il / Water to L	oad Hole:				Bbl./Gal.
mation:			Perf.	to							
er: Siz			Top atft.		Pump Trucks. 1	No. Used: St	d. <u>318</u>	\$p		_ Twin _	
C	emented:	Perforated f	írom	ft. toft.	Auxillary Equipmen	t		31	7-308		
	=		Swung at		Personnel BRANI	DON SCOTT	AND JORDA	N			
			ft. to		Auxiliary Tools						
					 Plugging or Sealing 	Materials:	Туре				
en Hole	Size	T.D.	ft. P.		1		, <u> </u>		Gals		lb.
			<u> </u>								
	lepresentative		KELSC	1	Treater			BRANDO	N		
		URES		2223)NIII-9349942220000000000000000000000000000000		and the second secon					
	Tubing	Casing	- Total Fluid Pumped			REI	MARKS				
1./p.m.	Tuomg	Cosing		ON LOCATION							
00				UNLOCATION	2						
					140 40(174	4751				<u> </u>	
				PUMP 35 SKS 60)/40 4% AT 1	1175					13 15 (5.154)
				PUMP 35 SKS AT	r 750'				<u> </u>		
			· ·	CIRCULATE CEM	IENT TO SUR	RFACE W	/ 135 SKS	1			
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