

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

Name of Party Responsible for Plugging Fees: ____

(Print Name)

KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

WELL PLUGGING RECORD

K.A.R. 82-3-117

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

Form CP-4

| OPERATOR: License #: | | | API No. 1 | 5 | | | | |
|---|----------------------------|-------------------|---------------------|--|--|--|--|--|
| Name: | | | Spot Desc | cription: | | | | |
| Address 1: | | | | Sec 7 | ſwp 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 | Footages Calculated from Nearest Outside Section Corner: | | | | |
| Phone: () | | | | □ NE □ NW □ | SE SW | | | |
| Type of Well: (Check one) | Well Gas Well | OG D&A Cathodic | County | | | | | |
| Water Supply Well Oth | her: | SWD Permit #: | 1 ' | County: Well #: | | | | |
| ENHR Permit #: | | age Permit #: | Lease Na | | | | | |
| Is ACO-1 filed? Yes | No If not, is well | log attached? Yes | No The plugo | Date Well Completed: | | | | |
| Producing Formation(s): List All | (If needed attach another | sheet) | | | (KCC District Agent's Name) | | | |
| Depth to 1 | Гор: Bottor | n: T.D | | | | | | |
| | | n: T.D | | Plugging Commenced: | | | | |
| Depth to 1 | | n: T.D | Plugging | Completed: | | | | |
| | | | | | | | | |
| Show depth and thickness of all | I water, oil and gas forma | tions. | | | | | | |
| Oil, Gas or Water F | Records | (| Casing Record (Surf | g Record (Surface, Conductor & Production) | | | | |
| Formation | Content | Casing | Size | Setting Depth | Pulled Out | | | |
| | | - | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| Describe in detail the manner in cement or other plugs were use | | _ | • | | ods used in introducing it into the hole. If | | | |
| Plugging Contractor License #: | | | Name: | | | | | |
| Address 1: | | Address 2: | Address 2: | | | | | |

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.

______ State: ______ Zip: ______ + _ _ _ _

Employee of Operator or Operator on above-described well,

______, ss.



TREATMENT REPORT

| Customer Shelly Resources | | | | Lease No. | | | | | Date | | | |
|---|--------------------|--------------------|----------|-----------|-------------|----------|----------|----------|-----------|------------|-------------|------------|
| Lease F | rench | 300 | | Well # | 1-2 | 7 | | | | 4-23 | 3-20 | 14 |
| Field Order | # Statio | n Dec | 134,115 | | | Casing | Dep | th | | | | State KS |
| Type Job | = NW/ | PIL | 1 | 2 | | | Formatio | n | <i></i> | Legal | Description | |
| PIP | E DATA | PE | RFORATII | NG DATA | | FLUID US | SED | - 10 | TRE | EATMENT | RESUM | IE |
| Casing Size | Tubing Si | ize Shot | s/Ft | | Acid | | | | RATE PRE | | SS ISIP | |
| Depth | Depth | From | Т | Ö | Pre F | Pad | | Max | | 5 Min. | | 4 |
| Volume | Volume | From | T | 0 | Pad | | | Min | 10 Min. | | | |
| Max Press | Max Pres | s From | т Т | ö | Frac | | | Avg | | 15 Min. | | 1 = |
| Well Connection | on Annulus \ | Vol. From | 1 T | io . | 35 | | 4 | HHP Use | ed | # | Annulu | s Pressure |
| Plug Depth | Packer D | epth From | т | Ö | Flush | 1 | | Gas Volu | me | | Total Lo | pad |
| Customer Rep | oresentative | Aller | 2 | Station | Manag | ger Kevi | n Gor | Lha | Treater | Deric | Fre | n)(1:2 |
| Service Units | 27283 | 2746 | 3 19826 | 6 1986 | 0 | | | | | | | ,,,,,, |
| Driver Names | Denn | PSt | JOS 5 | Jos. | 4 | | | | J | 4 E e 19 4 | | ar v |
| Time | Casing Pressure | Tubing Pressure | Bbls. P | umped | R | ate | | P 9 12 | Se | ervice Log | r te E | |
| *************************************** | 0.024 | | 2 2 2 | 44 | | | onl | -0092 | on 15 | SPety | Mer | tine |
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| | 9 ° 2 | | | | | / | 15+ P1 | us - 3 | 905 - | 505- | | 14 |
| | 20. | | 8 | 3 | · · · · · · | 4 3 | DUMP | | s wste | | | |
| 2 | 11 11 | | 1- | 3 | L | 1 | nir | 505× | | 1. | | |
| | , | L. | 5 | 0 | t | 4 7 | 0,501 | c10 3 | Abls W | 5100 | 473. | ble mud |
| | | | | | | | , | | | | 1 | |
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| | | | 13 | | 4 | Y | niv | 5051 | | | | |
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| | | | 8 | | | . R | 29+ no | - mi | 1 3054 | | | |
| | 2 | | 3 | | | | Maria Co | heir h | 11 V . 20 | 52 | | |

QUALITY OILWELL CEMENTING, INC. Federal Tax I.D.# 20-2886107

| Phone 785-483-2025 Cell 785-324-1041 | 1 10 | iome Office i | P.U. B | ox 32 mus | sell, KS 6/665 | NO. | 106 | | | |
|---|-----------------|-------------------------|------------|------------------|--|---|------------------------|--|--|--|
| Sec. | Twp. | Range | | County | State | On Location | Finish | | | |
| Date 4-16-14 27 | 21 | 17 | P | IW Nee | KS, | 1 100 1023 1220 1220 | 4:30PM | | | |
| | | , | Locati | onLarnes | Ks, 3w | 14 N INTO | roman en age. | | | |
| Lease FRENCH | | Well No. /-2 | 7 | Owner | na karodni ribosa yra | a filis. A pleasoftest of | may distribute. | | | |
| Contractor S TORLING DRIG | RIGHT | 5 | OTHU | To Quality Oi | lwell Cementing, Inc | cementing equipmer | nt and furnish | | | |
| Type Job Leng Supfee | oral SA | didax to to yet | e A3M | cementer and | d helper to assist ow | ner or contractor to c | o work as listed. | | | |
| Hole Size /2 94 | T.D. | 1075 | valetara o | Charge C | SHELBY RE | SOURCES | | | | |
| Csg. 85/8 | Depth | 1070 | la nei la | Street | variety of the ferm of the Contract or privately | | | | | |
| Tbg. Size | | | | City State | | | | | | |
| Tool BATFIE Plate | Depth | 1028' | | The above wa | s done to satisfaction a | and supervision of owne | r agent or contractor. | | | |
| Cement Left in Csg. 42, 25 | Shoe J | Joint 422 | 5 | Cement Amo | unt Ordered 4 | 00 SX -40 | wes to eable | | | |
| Meas Line | Displac | ce 65%/E | 384 | grada ekis | 3%cc 2 | & GieL | OMING | | | |
| P\$ EQUIPM | | | 13 ,215,2 | Common 240 | | | | | | |
| Pumptrk / & No. Cementer Helper | | Glesson G. | | Poz. Mix | 160 | 47 ver blace been | | | | |
| Bulktrk /3 No. Driver Driver | | Claytron 1 | 3, | Gel. 8 | edotem tollare tree | H-CSBAAP CO. | A MENS | | | |
| Bulktrk No. Driver Driver | | | Calcium/5 | | | | | | | |
| JOB SERVICES | & REMA | RKS | SPYO 3LI | Hulls | | | | | | |
| Remarks: | o estad | ge Kin saala Y II | iAUC) | Salt | | | | | | |
| Rat Hole | e remigis | eronardisti. Cus | er erti | Flowseal | | | | | | |
| Mouse Hole | | | | Kol-Seal | | | | | | |
| Centralizers | | | se de | Mud CLR 48 | | | | | | |
| Baskets | JISA S | CFL-117 or CD110 CAF 38 | | | | | | | | |
| D/V or Port Collar | ing (= | driga, Jern I. j | nikisimu | Sand | | | | | | |
| | | | | Handling 4 | 23 | | A MINITAL OF STREET | | | |
| Bay 25 New Jo | NAT'S | 50289 | 18 | Mileage | | | | | | |
| 23 #csq | Se: | t@_10 | 70' | | FLOAT EQUIPM | IENT | | | | |
| Recieved Circula | 7,01 | 1 Ken | ien F | Oxide Stree | Shoe 1- | 85/8 | 7 | | | |
| W/ 400 5x - 243 | 1 1 | Referse TR | P_{i} | Contralizer J | BAFFleflate/ - | 85/8 | TELL OF | | | |
| + DisplaceD a | 70 | Tal 0 | K | Baskets | man as foreira lis | BINEW Y'ILLAWY | - CATHANTIES | | | |
| 65/2 BBL/ Bel | LIND. | Land | | AFU Inserts | Maga | (er | Mon lebrid gir | | | |
| Plug @ 800 # | _ ~ | + SHUT | iN | Float Shoe | 2 7 1 7 6 | A people i | AUD | | | |
| | | | | Latch Down | 1501,dx | Rubber plus | * 696368 N-34(1) | | | |
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| 70 5 | OPS | 900 | | 1000 | | 5,00000000 | A Marine Carlo | | | |
| | | 0.00 | | Pumptrk Cha | irge Long Su | rface | | | | |
| | 14 | BNK'S | | Mileage 26 | | | | | | |
| | n 16 . rts | | | resident fracts | | Tax | | | | |
| | \$1 6.20mg | | | in Park et | | Discount | | | | |
| Signature ale Lastin | January Company | | | Buttle of States | | Total Charge | FOLKS | | | |