



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

**KANSAS CORPORATION COMMISSION 1204302**  
**OIL & GAS CONSERVATION DIVISION**  
**WELL PLUGGING RECORD**  
 K.A.R. 82-3-117

Form CP-4  
March 2009

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

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**

# ALLIED OIL & GAS SERVICES, LLC

Federal Tax I.D. # 20-8651475

062441

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

SERVICE POINT:

Medicine Lodge, KS

DATE	SEC.	TWP.	RANGE	CALLED OUT	ON LOCATION	JOB START	JOB FINISH
2-19-2014	18	21S	23W	6:00 PM	11:00 AM	12:00 PM	1:30 PM
LEASE	WELL #	LOCATION			COUNTY	STATE	
Stg. well	1-18H	Jermolov, KS			Hobbs Co	KS	
OLD OR NEW (Circle one)							

CONTRACTOR T. J. Smith Well Service OWNER SandRise Energy

TYPE OF JOB Old Well Plug

HOLE SIZE 7 7/8 T.D.

CASING SIZE \_\_\_\_\_ DEPTH \_\_\_\_\_

TUBING SIZE 2 7/8 DEPTH 1580'

DRILL PIPE \_\_\_\_\_ DEPTH \_\_\_\_\_

TOOL \_\_\_\_\_ DEPTH \_\_\_\_\_

PRES. MAX \_\_\_\_\_ MINIMUM \_\_\_\_\_

MEAS. LINE \_\_\_\_\_ SHOE JOINT \_\_\_\_\_

CEMENT LEFT IN CSG. \_\_\_\_\_

PERFS. \_\_\_\_\_

DISPLACEMENT 3 bbls mud

EQUIPMENT \_\_\_\_\_

PUMP TRUCK CEMENTER Deron F

# 471-265 HELPER Scott P.

BULK TRUCK \_\_\_\_\_

# 421-290 DRIVER Anthony Tuls

BULK TRUCK \_\_\_\_\_

# \_\_\_\_\_ DRIVER \_\_\_\_\_

REMARKS:

1580' loss hole, mix 75sx cement, dispise

7 bbls mud

870' loss hole, mix 75sx cement, dispise

3 bbls mud

60' circuler to surface

CHARGE TO: CWS

STREET \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

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 Anthony Smith

SIGNATURE x Anthony Smith

Thank you!!!

CEMENT AMOUNT ORDERED 1905.60 lbs

COMMON \_\_\_\_\_ @ \_\_\_\_\_  
POZMIX \_\_\_\_\_ @ \_\_\_\_\_  
GEL \_\_\_\_\_ @ \_\_\_\_\_  
CHLORIDE \_\_\_\_\_ @ \_\_\_\_\_  
ASC \_\_\_\_\_ @ \_\_\_\_\_

HANDLING \_\_\_\_\_ @ \_\_\_\_\_  
MILEAGE \_\_\_\_\_ @ \_\_\_\_\_

TOTAL \_\_\_\_\_

SERVICE \_\_\_\_\_

DEPTH OF JOB 1580'

PUMP TRUCK CHARGE \_\_\_\_\_ @ \_\_\_\_\_

EXTRA FOOTAGE \_\_\_\_\_ @ \_\_\_\_\_

MILEAGE \_\_\_\_\_ @ \_\_\_\_\_

MANIFOLD \_\_\_\_\_ @ \_\_\_\_\_

TOTAL \_\_\_\_\_

PLUG & FLOAT EQUIPMENT

None @ \_\_\_\_\_

@ \_\_\_\_\_

@ \_\_\_\_\_

@ \_\_\_\_\_

@ \_\_\_\_\_

TOTAL \_\_\_\_\_

SALES TAX (If Any) \_\_\_\_\_

TOTAL CHARGES \_\_\_\_\_

DISCOUNT \_\_\_\_\_ IF PAID IN 30 DAYS \_\_\_\_\_

False Invoice  
\$7,939.31

# ALLIED OIL & GAS SERVICES, LLC

Federal Tax I.D. # 20-8651475

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

SERVICE POINT:

Med. on ledge KS

DATE <u>2-18-14</u>	SEC. <u>19</u>	TWP. <u>21S</u>	RANGE <u>23W</u>	CALLED OUT	ON LOCATION	JOB START	JOB FINISH
LEASE <u>Starrett</u>	WELL # <u>1-18H</u>	LOCATION <u>Jrmore ks 9 n E into</u>		COUNTY <u>Hodgkinson</u>	STATE <u>KS</u>		

OLD OR NEW (Circle one)

CONTRACTOR PTA OWNER CWS

TYPE OF JOB PTA T-HAW W/S  
CEMENT AMOUNT ORDERED 60.5x 60.40.4:Gel

HOLE SIZE \_\_\_\_\_ T.D. \_\_\_\_\_  
CASING SIZE 7 DEPTH 4535  
TUBING SIZE 2 7/8 DEPTH 4535  
DRILL PIPE \_\_\_\_\_ DEPTH \_\_\_\_\_  
TOOL \_\_\_\_\_ DEPTH \_\_\_\_\_  
PRES. MAX \_\_\_\_\_ MINIMUM \_\_\_\_\_  
MEAS. LINE \_\_\_\_\_ SHOE JOINT \_\_\_\_\_  
CEMENT LEFT IN CSG. \_\_\_\_\_  
PERFS. \_\_\_\_\_  
DISPLACEMENT \_\_\_\_\_

EQUIPMENT

PUMP TRUCK CEMENTER Jake Heard  
# 471/265 HELPER Scott Paddy  
BULK TRUCK DRIVER James Bowen  
# 381/252 DRIVER \_\_\_\_\_  
BULK TRUCK DRIVER \_\_\_\_\_  
# \_\_\_\_\_ DRIVER \_\_\_\_\_

REMARKS:

DEPTH OF JOB \_\_\_\_\_ SERVICE \_\_\_\_\_  
PUMP TRUCK CHARGE \_\_\_\_\_ 2810.84  
EXTRA FOOTAGE \_\_\_\_\_ @ \_\_\_\_\_  
MILEAGE 7.5 @ 7.70 577.5  
MANIFOLD \_\_\_\_\_ @ \_\_\_\_\_  
L.V. 7.5 @ 4.40 330  
TOTAL 3718.34

CHARGE TO: CWS

STREET \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

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 X. Anthony Smith IF PAID IN 30 DAYS  
SIGNATURE X. Anthony Smith

SALES TAX (If Any) \_\_\_\_\_  
TOTAL CHARGES 5315.84  
DISCOUNT (4252.67)

PLUG & FLOAT EQUIPMENT

\_\_\_\_\_ @ \_\_\_\_\_  
\_\_\_\_\_ @ \_\_\_\_\_  
\_\_\_\_\_ @ \_\_\_\_\_  
\_\_\_\_\_ @ \_\_\_\_\_  
\_\_\_\_\_ @ \_\_\_\_\_  
TOTAL \_\_\_\_\_

