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

1216458

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 |
| | 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 #: Is ACO-1 filed? Yes No Is ACO-1 filed? Yes No If not, is well log attached? Yes No Producing Formation(s): List All (If needed attach another sheet) | County: Well #: 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 | Pulled Out | | | |
| | | | | | | |
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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 Fe | ees: | | | | |
| State of | County, | | , SS. | | |
| , | Print Name) | | | or Operator on above-d | |
| he is a first during a second second the second The still | Is a set a se | | a la susta a sustation sul a sud the subsection of | a foto a second s | to a file of a second |

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



| COP | ELA | ND |
|-----|-----|----|
| | | |

Acid & Cement

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

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4.3

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

POST OFFICE BOX 438 HAYSVILLE, KS 67060

(316) 524-1225 (316) 524-1027 FAX

> **INVOICE NUMBER:** C40891-IN

HARMAN 3306 2-28 LEASE:

BILL TO: SANDRIDGE/TITAN WELL SERVICE P.O. BOX 340 **DOVER, OK 73734**

| DATE | ORDER | SALESMAN | ORDER DATE | PURCHASE C | ORDER | SPECIAL INSTRUCTIONS | | |
|--------------------------------|------------------------|----------------------------------|-----------------------------------------------------|--------------------------------|------------------|------------------------------------------------------------|-----------|--|
| 07/14/2014 | C40891 | | 07/09/2014 | | | N | ET 30 | |
| QUANTITY | U/M | ITEM NO./DI | ESCRIPTION | | D/C | PRICE | EXTENSION | |
| 1.00 | EA | CEMENT PUMP | CHARGE | | 0.00 | 650.00 | 650.00 | |
| 200.00 | SAX | | ENT | | 0.00 | 12.00 | 2,400.00 | |
| 5.00 | SAX | CALCIUM CHLC | RIDE - SAX | | 0.00 | 30.00 | 150.00 | |
| 90.00 | MI | CEMENT MILEA | GE PUMP TRUCK | | 0.00 | 4.00 360.0 | | |
| 3.00 | HR | OVERAGE OF 4 | HR MIN | | 0.00 100.00 . 30 | | | |
| 5.00 | HR | TANK TRUCK 1 | 32 | | 0.00 | 95.00 | 475.00 | |
| 200.00 | EA | BULK CHARGE | BULK CHARGE | | | 1.25 | 250.00 | |
| 846.00 | мі | BULK TRUCK - TON MILES 0.00 1.10 | | | 930.60 | | | |
| | | | · · | | | | | |
| REMIT TO: P.O. BO HAYSVI | X 438 LLE, KS 67060 | FUEL SURCHAR MILEAGE, PUM | COB GE IS NOT TAXABLE AN IP AND OR DELIVERY C | ND IS ADDED TO HARGES ONLY. | HAR | Net Invoice: 5,5 HARCO Sales Tax: Invoice Total: 5,6 | | |
| RECEIVED BY | | | NET 30 DAYS | | | | | |

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.

| BOPELUND | | FIELD ORDER Nº C 40891 |
|--------------------------------------------------|------------------------------------------------------------|---------------------------|
| Acid & Cement | BOX 438 • HAYSVILLE, KANSAS 67060 316-524-1225 DATE_ | July 9 20 14 |
| IS AUTHORIZED BY: Sand Endy | (NAME OF CUSTOMER) | State |
| Address | City | |
| To Treat Well As Follows: Lease <u>Harman</u> | Well No. 3306 2-28 | Customer Order No |
| Sec. Twp. Range | County Hasper | State Ky |

CONDITIONS: As a part of the consideration hereof it is agreed that Copeland Acid Service is to service or treat at owners risk, the hereinbefore mentioned well and is not to be held liable for any damage that may accrue in connection with said service or treatment. Copeland Acid Service has made no representation, expressed or implied, and no representations have been relied on, as to what may be the results or effect of the servicing or treating said well. The consideration of said service or treatment is payable. There will be no discount allowed subsequent to such date. 6% interest will be charged after 60 days. Total charges are subject to correction by our invoicing department in accordance with latest published price schedules.

an an Onerster

By_

Agent

The undersigned represents himself to be duly authorized to sign this order for well owner or operator.

THIS ORDER MUST BE SIGNED BEFORE WORK IS COMMENCED_

| | | | LINUT | |
|------|----------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------|---------|
| CODE | QUANTITY | DESCRIPTION | | AMOUNT |
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| | 846 | Bulk Truck Miles) / tom MIK | | |
| | | Process License Fee onGallons TOTAL BILLING | | 500 24 |
| | | TOTAL DIELING | <u></u> | 5603 = |

I certify that the above material has been accepted and used; that the above service was performed in a good and workmanlike manner under the direction, supervision and control of the owner, operator or his agent, whose signature appears below.

| Station Buckeyes Nell Qwner, Operator or Agent |
|------------------------------------------------|
| Remarks Play our 5:20" (Withour Smith |
| Remarks NET 30 DAYS |

GUPELUUU Acid & Cement

TREATMENT REPORT

Acid Stage No. ...

| | | 2 | | | Type Treatment: | Amt. | Type Fluid | Sand Size 1 | ounds of Sand |
|---------------|----------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------|--------------|---------------------|-----------------------------------------------|------------|-------------|---------------|
| Date 79 | 115 Di | strict Bigg | F. O | No | | second the second second second second second | | | |
| | DRicks | 1.te | N Well? | service | | Bbl. /Gal | | | |
| Well Name & N | 10. Harm | 1 3300 | 0 9-98 | | •••••• | | | | |
| Location | | | Field | | | | | | |
| County | Ropen | •••••• | State | | | | | | |
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| | | | | Set atft. | | | 't. to | | |
| | | | | to | from | t | t. to | ft. No. ft | |
| | | | | to | Actual Volume of C | Dil/Water to Los | d Hole: | | Bbl. /Gal. |
| | | | | to | | | <u>چ</u> | | |
| | | | | Bottom atft. | | | 322 | | |
| Ceme | ented: Yes/No. | Perforated fro | m | ft. toft. | | | 22. | | |
| | | | | 050 n. | | | | | |
| Perf | orated from | | ft. to | | Auxiliary Tools | - Muturla las Pur | | aska Class | A Com |
| | | | | | Plugging or Sealing | Materials: 19p | ioRida | 1.1.1- | |
| Own Hole Size | | . T. D | ft, P.1 | 3. toft. | 3 1315.2.1. | | | | |
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| Company R | epresentative | and the second se | | | _ Treater | in the | ¥) | | |
| TIME | PRESS | Casing | Total Fluid Pumped | | | R'E MAR | K 8 | | |
| a.m /p.m. | Tanta | Casing | | 0 | TEN | | R Not No | | |
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