



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

KANSAS CORPORATION COMMISSION 1220446  
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

Date 8/14/2014 District Liberal # 21 Ticket No. 52597  
 Company CHESAPEAKE Rig \_\_\_\_\_  
 Lease BRYANT Well No 4-8  
 County SEWARD State KS

CEMENT DATA  
 Spacer Type 22 BBL GEL SPACER  
 Amt. \_\_\_\_\_ Sks Yield \_\_\_\_\_ ft<sup>3</sup>/sk Density \_\_\_\_\_ PPG

Location \_\_\_\_\_  
 Field \_\_\_\_\_  
 Casing Data  Conductor  PTA  Squeeze  Misc.  
 Surface  Intermediate  Production  Liner  
 Size 5 1/2 Type \_\_\_\_\_ Weight 15.5 Collar \_\_\_\_\_

LEAD: Time \_\_\_\_\_ hrs. Type 60/40 CLASS A  
2%GEL Excess \_\_\_\_\_  
 Amt. 110 Sks Yield 1.5 ft<sup>3</sup>/sk Density 13.5 PPG  
 TAIL: Time \_\_\_\_\_ hrs. Type \_\_\_\_\_  
 Excess \_\_\_\_\_  
 Amt. \_\_\_\_\_ Sks Yield \_\_\_\_\_ ft<sup>3</sup>/sk Density \_\_\_\_\_ PPG  
 WATER Lead 7.5 Gal/sk Tail \_\_\_\_\_ Gal/sk Total \_\_\_\_\_ BBLs

Casing Depths Top \_\_\_\_\_ Bottom \_\_\_\_\_

Pump Trucks Used: 903-501  
 Bulk Equipment 993-467

Drill Pipe: BBLS/LIN. FT 0.0039 LIN. FT/BBL \_\_\_\_\_  
 Open Hole: BBLS/LIN. FT \_\_\_\_\_ LIN. FT/BBL \_\_\_\_\_  
 Capacity Factors: BBLS/LIN. FT \_\_\_\_\_ LIN. FT/BBL \_\_\_\_\_  
 Casing: BBLS/LIN. FT \_\_\_\_\_ LIN. FT/BBL \_\_\_\_\_  
 Open Holes: BBLS/LIN. FT \_\_\_\_\_ LIN. FT/BBL \_\_\_\_\_  
 Drill Pipe: BBLS/LIN. FT \_\_\_\_\_ LIN. FT/BBL \_\_\_\_\_  
 Annulus: BBLS/LIN. FT \_\_\_\_\_ LIN. FT/BBL \_\_\_\_\_  
 Perforations From \_\_\_\_\_ ft to \_\_\_\_\_ ft Amt \_\_\_\_\_

Float Equipment: Manufacturer \_\_\_\_\_  
 Shoe: Type \_\_\_\_\_ Depth \_\_\_\_\_  
 Float: Type \_\_\_\_\_ Depth \_\_\_\_\_  
 Centralizers: Quantity \_\_\_\_\_ Plugs Top \_\_\_\_\_ Bottom \_\_\_\_\_  
 Stage Collars \_\_\_\_\_  
 Special Equipment \_\_\_\_\_  
 Disp: Fluid Type \_\_\_\_\_ Amt \_\_\_\_\_ bbls Weight \_\_\_\_\_ PPG  
 Mud Type \_\_\_\_\_ Weight \_\_\_\_\_

COMPANY REPRESENTATIVE \_\_\_\_\_ CEMENTER ALDO ESPINOZA

TIME	PRESSURES PSI		FLUID PUMPED DATA			REMARKS
	AM/PM	DRILL PIPE CASING	ANNULUS	TOTAL FLUID	PUMPED PER TIME PERIOD	
1130AM						ARRIVE TO LOCATION
1200PM						RIG UP
1215PM						SAFETY MEETING
1235PM				10		CIRCULATE W/WATER 10 BBL
1245PM						PUMP 22 BBL OF GEL SPACER
100PM						1ST PLUG @1560 PUMP 10.7 BBL OF SLURRY CEMENT
						DISPLACE 4.5 BBL W/WATER
148PM						2ND PLUG @ 55OFT PUMP 10.7 BBL OF SLURRY
						DISPLACE 2 BBL W/WATER
213PM						3RD PLUG FROM 60 FT TO SURFACE
						PUMP 8 BBL OF SLURRY CEMENT
245PM						WASH UP PUMPING LINES
300PM						RIG DOWN
345PM						LEAVE LOCATION

FINAL DISP. PRESS. \_\_\_\_\_ PSI BUMP PLUG TO \_\_\_\_\_ PSI BLEEDBACK \_\_\_\_\_ BBLs **THANK YOU**

# ALLIED OIL & GAS SERVICES, LLC 052597

Federal Tax I.D.# 20-5975804

REMIT TO P.O. BOX 31  
RUSSELL, KANSAS 67665

SERVICE POINT: Liberal (21)

DATE <u>8-14-14</u>	SEC. <u>R</u>	TWP. <u>33S</u>	RANGE <u>33W</u>	CALLED OUT	ON LOCATION	JOB START <u>2:00 pm</u>	JOB FINISH <u>3:00 pm</u>
LEASE <u>Exort B</u>	WELL # <u>4-8</u>	LOCATION <u>Liberal KS, 11 mile North</u>			COUNTY <u>Seward</u>	STATE <u>KS</u>	
OLD OR NEW (Circle one)				<u>on 83 1/2 west</u>			

CONTRACTOR Exort  
 TYPE OF JOB P.T.A.  
 HOLE SIZE 7 7/8 T.D.  
 CASING SIZE 5 1/2 DEPTH  
 TUBING SIZE 2 1/2 DEPTH 1560'  
 DRILL PIPE DEPTH  
 TOOL DEPTH  
 PRES. MAX MINIMUM  
 MEAS. LINE SHOE JOINT  
 CEMENT LEFT IN CSG.  
 PERFS.  
 DISPLACEMENT

**EQUIPMENT**  
 PUMP TRUCK CEMENTER Alto Espinoza  
 # 903-501 HELPER Cesar Pavia  
 BULK TRUCK  
 # 999-467 DRIVER Alfonso Ayala  
 BULK TRUCK  
 # DRIVER

**REMARKS:**

OWNER AFC # 803202

CEMENT  
 AMOUNT ORDERED 110 SK 60/40 Class A,  
2% gel

COMMON	@		
POZMIX	@		
GEL <u>Bentonite 129016</u>	@	<u>1.05</u>	<u>1,354.50</u>
CHLORIDE	@		
ASC	@		
<u>Allied 60/40 2-class 110</u>	@	<u>18.43</u>	<u>2,027.30</u>
	@		
	@		
	@		
	@		
	@		
	@		
	@		
HANDLING	@		
MILEAGE	@		
			TOTAL <u>3,381.80</u>

**SERVICE**

DEPTH OF JOB		
PUMP TRUCK CHARGE		<u>2,249.24</u>
EXTRA FOOTAGE <u>20 mi</u>	@ <u>4.40</u>	<u>88.00</u>
MILEAGE <u>Vehicle 40 mi</u>	@ <u>7.70</u>	<u>154.00</u>
MANIFOLD	@	
<u>Handling 286.31-ft<sup>3</sup></u>	@ <u>2.48</u>	<u>566.24</u>
<u>Digging 109.20 T-m</u>	@ <u>2.75</u>	<u>300.30</u>
TOTAL <u>3,353.38</u>		

CHARGE TO: Chesapeake  
 STREET \_\_\_\_\_  
 CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

**PLUG & FLOAT EQUIPMENT**

	@	
	@	
	@	
	@	
	@	
TOTAL _____		

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.

SALES TAX (If Any) \_\_\_\_\_  
 TOTAL CHARGES 6,735.18  
 DISCOUNT \_\_\_\_\_ IF PAID IN 30 DAYS

PRINTED NAME Steve Emick  
 SIGNATURE [Signature]

NET 6,061.67