

**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

1223128

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 #:   |                               |                     | 1        | API No. 15   |                       |   |  |  |  |
|--|-------------------------------|---------------------|----------|--|-----------------------|---|--|--|--|
| Name:  |                               |                     |          | Spot Description:  |                       |   |  |  |  |
| Address 1:   |                               |                     |          | •  | ·                     | wp 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 Cathodi      | ic       | County:  |                       |   |  |  |  |
| Water Supply Well         Other:                               |                               |                     |          |  | Lease Name: Well #:   |   |  |  |  |
|  |                               |                     |          |  | Date Well Completed:  |   |  |  |  |
| Is ACO-1 filed? Yes  | No If not, is well            | I log attached? Yes | No       | The plugging proposal was approved on: (Date)            |                       |   |  |  |  |
| Producing Formation(s): List A                                 | All (If needed attach another | r sheet)            |          | by:  |                       | (KCC <b>District</b> Agent's Name)          |  |  |  |
| Depth to   | Top: Botto                    | om: T.D             |          | Plugging (   | Commenced:            |   |  |  |  |
| Depth to   | o Top: Botto                  | om: T.D             |          | 00 0   |                       |   |  |  |  |
| Depth to   | Top: Botto                    | om:T.D              |          |  |                       |   |  |  |  |
|  |                               |                     |          |  |                       |   |  |  |  |
| Show depth and thickness of                                    | all water, oil and gas forma  | ations.             |          |  |                       |   |  |  |  |
| Oil, Gas or Water  | r Records                     |                     | Casing R | Casing Record (Surface, Conductor & Production)          |                       |   |  |  |  |
| Formation  | Content                       | Casing              | Size     |  | Setting Depth         | Pulled Out                                  |  |  |  |
|  |                               |                     |          |  |                       |   |  |  |  |
|  |                               |                     |          |  |                       |   |  |  |  |
|  |                               |                     |          |  |                       |   |  |  |  |
|  |                               |                     |          |  |                       |   |  |  |  |
|  |                               |                     |          |  |                       |   |  |  |  |
| Describe in detail the manner<br>cement or other plugs were us |                               |                     |          |  |                       | ds used in introducing it into the hole. If |  |  |  |
| Plugging Contractor License #:                                 |                               |                     | Name: _  |  |                       |   |  |  |  |
| Address 1:   |                               |                     | Address  | 2:   |                       |   |  |  |  |
| City:  |                               |                     |          | State:   |                       | Zip:+                                       |  |  |  |
| Phone: ( )   |                               |                     |          |  |                       |   |  |  |  |
| Name of Party Responsible fo                                   | or Plugging Fees:             |                     |          |  |                       |   |  |  |  |
| State of   |                               |                     | _ , SS.  |  |                       |   |  |  |  |
|  | <b>3</b> , -                  |                     |          |  | ployee of Operator or | Operator on phase described                 |  |  |  |
| (Print Name)   |                               |                     |          | Em   | ployee of Operator or | Operator on above-described well,           |  |  |  |

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.



DATE\_

| 20-431-9210                        | or 800-467-8676  | estato la         | e Italianian ar  | CEMENT                             |          | na pur sanat in<br>Dang am sek |                     | K.                  |  |
|------------------------------------|--|-------------------|------------------|------------------------------------|----------|--------------------------------|---------------------|---------------------|--|
| DATE                               | CUSTOMER#  | WE                | LL NAME & NUM    | MBER SECTION                       |          | TOWNSHIP                       | RANGE               | COUNTY              |  |
| 9/2/14                             | 2199   | Sond              | regger           | 1-35                               | 35       | 21                             | 33                  | Finney              |  |
| CUSTOMER                           | !  |                   | 33               | Scotterty                          |          |                                |                     | )                   |  |
| Chesapeake<br>Mailing Address      |  |                   | S to Gago        | TRUCK#                             | DRIVER   | TRUCK#                         | DRIVER              |                     |  |
|                                    |  |                   | Rd 1/2W<br>Sinto | 731                                | Cory     | 78-111-1711-1                  |                     |                     |  |
|                                    |  |                   |                  | 693                                | Rob      |                                | di miner            |                     |  |
| ITY                                | The state of the s | STATE             | ZIP CODE         |                                    | 529      | Lance                          | in of femore        | el systemic         |  |
| OB TYPE /                          | 7WP  | HOLE SIZE         |                  | HOLE DEPTH                         |          | CASING SIZE &                  | WEIGHT 51/2         | e in the section of |  |
| ASING DEPTH                        |  |                   |                  |                                    | 6        |                                | OTHER Perfs 2694 To |                     |  |
|                                    | THE RESERVE OF THE PARTY OF THE |                   |                  |                                    | -        | CEMENT LEFT II                 |                     | 0101110             |  |
| DISPLACEMENT 28.5 DISPLACEMENT PSI |  |                   | MIX PSI          |                                    | RATE     |                                |                     |                     |  |
|                                    |  |                   |                  |                                    | 1 = 1    |                                | 11 60/              | 119/1/1/            |  |
| 250# #                             | efty Meet  | ne nig            | up on L          | xaci wei                           | Dervice  | MIX 160                        | SK5 140             | 1/0 Gelle           |  |
| 220 11                             | ults Dow   | neasing           | DISPIRE          | e 20,50                            | oc water | ressure 7                      | 3/1/5/              | Held                |  |
| lead off                           | unhook for   | om Casi           | ng cog ho        | le Mun la                          | bing mi  | x 75 5/5                       | Pull Tubi           | ng                  |  |
| 11X 120                            | SAS Lbu  | on Casi           | ng & Col         | culate T                           | o Surt   | ace Rig                        | Down                |                     |  |
|                                    | THE PERSON AND AND ADDRESS OF THE PERSON ADDRESS OF THE PERSON AND ADDRESS OF THE PERSON AND ADDRESS OF THE PERSON ADDRESS OF THE PERS | PARAMETER DA      |                  | 30312 37 199                       |          |                                |                     |                     |  |
| Date, altrosts                     | arte is estiman.   | ITHEMS IN         |                  | KWI, III                           |          |                                | and the way         | a stronger          |  |
| Turns I III.                       | III III II I  | an again and      | orași            | No.                                |          | outle firshin a                | 0,000,000           | their death         |  |
| No. of the                         | BEAUTY STATE   | 27.11d - 15.31 II | <u> </u>         | TOTAL CO.                          |          |                                | Styrill The         | St of a district    |  |
| AFE # S                            | 303149   | 1                 | January 2 ag     | Danie -                            |          | 0                              | and out that        | 2 7 WOO - (a.       |  |
|                                    | HALL SHOT  | DMOA-18           |                  | F                                  | Janks 1  | & laven &                      | Crew                | Edit to pross       |  |
| ACCOUNT                            | QUANITY  | or UNITS          | D                | DESCRIPTION of SERVICES or PRODUCT |          |                                | UNIT PRICE          | TOTAL               |  |
| 5405 A                             | 1  | 20/69             | PUMP CHAR        | RGE                                |          |                                | \$ 875,00           | #8759               |  |
|                                    |  |                   |                  |                                    |          |                                | 1 - 26              | -                   |  |

| CODE      | QUANITY or UNITS | DESCRIPTION of SERVICES or PRODUCT   | UNIT PRICE | TOTAL            |
|-----------|------------------|--|------------|------------------|
| 5405 A    | 1                | PUMP CHARGE  | \$875,00   | \$87500          |
| 5406      | 60               | MILEAGE  | 1 75       | 315.00           |
| 5407 A    | 15.27            | Ton Mileage Delivery   | 1.75       | 1603,35          |
| 1131      | 355 SKS          | 6/40 Poz míx   | 15,88      | 5630,30          |
| 1118 B    | 1221 "           | Bentonite  | \$ ,27     | 329,67           |
| 1107      | 89               | Floseal  | 2.97       | 8 264, 33        |
| 1105      | 350              | Cotton Seed Hulls  | .58        | ₹ 203,00         |
| 4406      | /                | 5/2 Rubber Plug  | 92,50      | 92,50            |
|           |                  |  |            | Evzy-fiffe       |
| 4         |                  | Total Internal   |            |                  |
| 7         |                  |  |            | 9313.15          |
|           |                  | com le manus To conte therfale   |            | \$ 931,31        |
|           |                  | m annipada in Emplored admin<br>aminis - 25 to 1822 200 to 1831  | Sub Total  | 8381.84          |
|           |                  | off on representative of   | SALES TAX  | manta disconside |
| avin 3737 | JELJ C (         | The second secon | ESTIMATED  | then property    |

I acknowledge that the payment terms, unless specifically amended in writing on the front of the form or in the customer's account records, at our office, and conditions of service on the back of this form are in effect for services identified on this form

TITLE\_

## INVOICE

## LOG-TECH OF KANSAS, INC.

P.O. BOX 885

GREAT BEND, KANSAS 67530

(620) 792-2167

8138

|  |                     |        | 1            | Date   | 4-9              | 1-14   |    |
|--|---------------------|--------|--------------|--|------------------|--------|----|
| CHARGE TO: Chesapeake Operal   | 11.0                | Ta     |              |  |                  |        |    |
| ADDRESS  | 100                 | LIN    | _            |  |                  |        |    |
| R/A SOURCE NO  | OMEDO               | DED    | NO A         | F  | 2031             | 49     | -  |
| R/A SOURCE NO CUST LEASE AND WELL NO CUST  | 35 EIE              | וחבת   | NO. A        | -  | 0001             |        |    |
| NEAREST TOWN CO  | ZZZ FIE             | E a    | 0011         |  | OTA              | TF 1/2 |    |
| SPOT LOCATION SEC  | JUNITY              | Т.     | WD 2         | 15   | SIA              | IF -   |    |
| ZERO CASING SIZE   | 1 11                |        | VVP.         | VALE   | HANGE            | 12     | n  |
| CUSTOMER'S T.D. LOG 1  | TECH                |        |              | ^^_  | EVEL             | 221    | _  |
| ENGINEER LIBETZ OF   | PERATOR             | 11     | - the        | 2010 6   | Lych             | 30     | _  |
|  |                     | -/-/   | 24.11        | 300  |                  |        |    |
| PERFORA  | TING                |        |              |  |                  | 20178  |    |
| Description  | 111                 |        | Shots Fr     | Depth<br>om  | То               | Amount |    |
| Down HSC 3125-332 56 um  | + 110/45            |        | 1 3          | 10 3   | 51               |        |    |
|  |                     |        |              |  |                  |        |    |
|  |                     |        |              |  |                  |        |    |
|  |                     |        |              |  |                  |        |    |
|  |                     |        |              |  |                  | _      |    |
|  |                     | - 525  | (2)          | _  |                  |        |    |
|  |                     |        |              |  |                  | 0500   | _  |
|  |                     |        |              |  |                  | 8500   |    |
| DEPTH AND OPERAT   | IONS CHA            | RGE    | S            |  |                  |        |    |
| Description  | F                   | om Dep | oth To       | Total<br>No. Ft.   | Price<br>Per Ft. | Amount |    |
| Gamma Ray / CCL / Bond   |                     | 2      | 1150         | MIN  | 31               | 9300   | 0  |
| 7 /  | 1/                  | 50     | 0            | MIN  | 79               | 5800   | 0  |
|  |                     |        |              |  |                  | 7 14 0 |    |
|  |                     |        |              |  |                  |        |    |
| A DESCRIPTION OF THE PROPERTY  |                     |        |              |  |                  | No.    |    |
|  |                     |        |              |  |                  |        |    |
|  |                     |        |              |  |                  |        |    |
|  |                     |        |              |  |                  |        |    |
|  |                     | -      |              |  |                  |        |    |
|  |                     |        | 8            |  |                  |        |    |
| MISCELLAN  | EOUS                |        | 170          |  |                  |        |    |
| Description  |                     |        | -            | Qu   | antity           | Amoun  | t  |
| Service Charge   |                     |        | The state of |  |                  | 5500   | 20 |
|  |                     | 1190   |              |  | 1                |        |    |
| THE STATE OF THE PROPERTY OF THE PARTY OF TH |                     |        |              |  |                  |        |    |
|  |                     |        |              | Land Street  |                  |        |    |
|  | Harry Pile          | 181    |              | 1 -91  |                  |        |    |
| PRICES SUBJECT TO CORRECTION BY BILLING DEPARTMENT   |                     |        |              |  | 1                | 20100  | V  |
| RECEIVED THE ABOVE SERVICES ACCORDING TO THE TERMS   |                     |        |              | s  | Sub Total        | 19100  | 0  |
| AND CONDITIONS SPECIFIED ON THE REVERSE SIDE TO WHICH  | Code Ref            |        |              | Tool Ir  | nsurance         |        |    |
| WE HEREBY AGREE.   |                     |        |              |  | Тах              |        |    |
| 1 1 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1  |                     |        |              |  |                  |        | -  |
| Customar Signature Date  | -                   |        |              |  | 0                | 2765 8 | 0  |
| Customer Signature Date  | Company of the last |        |              | The state of the s | 0                | 1000   |    |