

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

1224918

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	5 -	
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: SWD Permit #:				Lease Name: Well #: Date Well Completed: (Date) The plugging proposal was approved on: (Date)		
ENHR Permit #: Gas Storage Permit #:						
Is ACO-1 filed? Yes No If not, is well log attached? Yes No						
Producing Formation(s): List A	All (If needed attach another	r sheet)		by:		(KCC District Agent's Name)
Depth to	Top: Botto	om: T.D		Plugging (Commenced:	
Depth to Top: Bottom: T.D						
Depth to	Top: Botto	om:T.D				
Show depth and thickness of a	all water, oil and gas forma	ations.				
Oil, Gas or Water Records			Casing Record (Surface, Conductor & Production)			
Formation	Content	Casing	Size		Setting Depth	Pulled Out
Describe in detail the manner cement or other plugs were us						ods 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	Countv			_ , SS.		
	3 , -				ployee of Operator or	Operator on above-described well,
	(Print Name)			=[]]	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.

ALLIED OIL & GAS SERVICES, LLC

REMIT TO	P.O. BOX 93999 SOUTHLAKE, TEXAS 76092
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Federal Tax I.D. # 20-8651475 SERVICE POINT: great Bend JOB FINISH 5:00 pm JOB START ON LOCATION 2:10 pm CALLED OUT RANGE :10 pm 9-22-14 STATE Pundell LEASE WELL# // LOCATION cluto OF OR NEW (Circle one) OWNER same lliance well service CONTRACTOR ALLA TYPE OF JOB PTA CEMENT AMOUNT ORDERED 250 Mg
G Pla. (200) Used T.D. HOLE SIZE DEPTH CASING SIZE DEPTH 676 TUBING SIZE DEPTH DRILL PIPE DEPTH 0 COMMON TOOL MINIMUM @ PRES. MAX POZMIX SHOE JOINT 0 MEAS. LINE GEL @ CEMENT LEFT IN CSG CHLORIDE (a) 2005x 60/40+4% @ 18.92 3.784.00 PERFS. ASC DISPLACEMENT #20 @ 2.97 148.50 EQUIPMENT fla Scal @ 3.932.50 CEMENTER Charles King 0 393.25 10% HELPER good closes PUMP TRUCK #398 #609-239 DRIVER Kevin Zreighouse @ Service 660.30 @ 2.48 2.75 BULK TRUCK HANDLING 366.25 770.69 DRIVER MILEAGE 11.21 x 2.5 x REMARKS: Ran 676' 23'8 Cy 1.09 BBI 47.90 H20 1 50 m displace 1.09 BB1 H20 phis a 290 mix 100 rx a 60' mix 50 rx cer plus DEPTH OF JOB 676 1250.00 320 PUMP TRUCK CHARGE EXTRA FOOTAGE @ @ 7.70 192.50 mefuce MILEAGE HUM @ 7.40 110.0° MANIFOLD -@_ TOTAL 2.983. 49 CHARGE TO: Raymond or Disc 10% 298. 35 STREET. PLUG & FLOAT EQUIPMENT ZIP_ STATE_ @ thank you! 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.

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Dist % TOTAL _

TOTAL CHARGES 6.915. 99

TOTAL CHARGES 6.91. 60 (15/10/6)

IF PAID IN 30 DAYS DISCOUNT 6.224.39