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

1225038

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
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 Cathodic Water Supply Well Other: SWD Permit #: SWD Permit #: SWD Permit #: ENHR Permit #: Gas Storage Permit #: Gas Storage Permit #: Is ACO-1 filed? Yes No Producing Formation(s): List All (If needed attach another sheet) Depth to Top: Bottom: T.D.	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	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 Plugg	ing Fees:			
State of	County,	, SS.		
	(Print Name)	Employee of Operator	or Operator on a	bove-described well,
boing first duly sworp on oath save: T	That I have knowledge of the facts	statements and matters herein contained and the log	a of the above-describe	d well is as filed and

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

	G-TECH OF KANSAS, P.O. BOX 885 GREAT BEND, KANSAS 675 (620) 792-2167	30	Date <u>E</u>	INVOICE 8137 7-14
charge to: <u>CHESAPEARE</u>	PPFRATING			
ADDRESS				
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RECEIVED THE ABOVE SERVICES ACCORDING AND CONDITIONS SPECIFIED ON THE REVERSE WE HEREBY AGREE.			Sub Total Tool Insurance Tax	<u>/305 pi</u>

WHITE - Original CANARY - File Copy PINK - Customer Copy GOLDENROD - Field Copy

LOG-TECH OF KANSAS, INC. P.O. BOX 885 GREAT BEND, KANSAS 67530 (620) 792-2167

Date 8-28-2014

INVOICE

8132

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Customer Signature	Date	<u>.</u>					2166	Q35.0°

WHITE - Original CANARY - File Copy PINK - Customer Copy GOLDENROD - Field Copy



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<u>ela</u>						
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Drill Pipe: Size		Weight		Collars		
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CAPACITY FACTO	ORS:					Shoe: Type Depth
Casing:	Bbls/Lin. ft		Lin. ft./B	bl		Float: Type Depth
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	PRESSU		FLU	620-26	DATA	CEMENTER
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FINAL DISP, PRESS: _______ PSI BUMP PLUG TO ______ PSI BLEEDBACK ______ BBLS. THANK YOU MILLER PRINTERS, INC. - Great Band, KS

ALLIED OIL & GAS SERVICES, LLC 063037

Federal Tax I.D. # 20-8651475

REMIT TO P.O. BOX 93999

SOUTHLAKE, TEXAS 76092

SERVICE POINT:

Advise Lalge K

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