



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

KANSAS CORPORATION COMMISSION 1225943
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



PO Box 93999
Southlake, TX 76092

Voice: (817) 546-7282
Fax: (817) 246-3361

INVOICE

Invoice Number: 145058
Invoice Date: Aug 14, 2014
Page: 1

AUG 25 2014

Bill To:
Novy Oil & Gas, Inc. P.O. Box 559 Goddard, KS 67052

Customer ID	Field Ticket #	Payment Terms	
Nove	63709	Net 30 Days	
Job Location	Camp Location	Service Date	Due Date
KS2-03	Great Bend	Aug 14, 2014	9/13/14

Quantity	Item	Description	Unit Price	Amount
1.00	WELL NAME	Benjes #3		
320.00	CEMENT MATERIALS	Class A Common	17.90	5,728.00
902.00	CEMENT MATERIALS	Chloride	1.10	992.20
336.00	CEMENT SERVICE	Cubic Feet Charge	2.48	833.28
542.15	CEMENT SERVICE	Ton Mileage Charge	2.75	1,490.91
1.00	CEMENT SERVICE	Plug to Abandon	1,512.25	1,512.25
35.00	CEMENT SERVICE	Pump Truck Mileage	7.70	269.50
35.00	CEMENT SERVICE	Light Vehicle Mileage	4.40	154.00
1.00	CEMENT SUPERVISOR	Charles Kinyon		
1.00	OPERATOR ASSISTANT	Brian Lang		
1.00	OPERATOR ASSISTANT	Kevin Weighous		

ALL PRICES ARE NET, PAYABLE 30 DAYS FOLLOWING DATE OF INVOICE. 1 1/2% CHARGED THEREAFTER. IF ACCOUNT IS CURRENT, TAKE DISCOUNT OF

\$ 2,196.03

ONLY IF PAID ON OR BEFORE
Sep 13, 2014

Subtotal	10,980.14
Sales Tax	785.08
Total Invoice Amount	11,765.22
Payment/Credit Applied	
TOTAL	11,765.22

- 2,196.03
9,569.19

ALLIED OIL & GAS SERVICES, LLC 063709

Federal Tax I.D. # 20-8651475

AUG 25 2014

REMIT TO P.O. BOX 93999
SOUTHLAKE, TEXAS 76092

SERVICE POINT: great Bend

DATE <u>8-14-14</u>	SEC <u>29</u>	TWP <u>23</u>	RANGE <u>10</u>	CALLED OUT	ON LOCATION <u>8:30 am</u>	JOB START <u>12:00 pm</u>	JOB FINISH <u>1:00 pm</u>
LEASE <u>Benja</u>	WELL # <u>3</u>		LOCATION <u>281 4th st Rd to 281 rd</u>		COUNTY <u>Petro</u>	STATE <u>Ka</u>	
OR NEW (Circle one) <u>O</u>			<u>25 1/4 w Schute</u>				

CONTRACTOR Cheyenne Well Service OWNER same

TYPE OF JOB PTA
 HOLE SIZE 8 5/8 T.D.
 CASING SIZE 5 1/2 DEPTH
 TUBING SIZE 2 3/8 DEPTH 1630
 DRILL PIPE DEPTH
 TOOL DEPTH
 PRES. MAX MINIMUM
 MEAS. LINE SHOE JOINT

CEMENT 320
 AMOUNT ORDERED 320 net class A 31 cc

CEMENT LEFT IN CSG.
 PERFS.
 DISPLACEMENT H2O

COMMON 320 @ 17.90 5,728.00
 POZMIX @
 GEL @
 CHLORIDE 902 @ 1.10 992.20
 ASC @

EQUIPMENT

Material Total @ 6,720.20
Disc @ 20% 1,344.04

PUMP TRUCK # 398 CEMENTER Charles Kingler
 HELPER Brian Long
 BULK TRUCK # 609-239 DRIVER Kevin Weidmann
 BULK TRUCK # DRIVER

Service @
 HANDLING 336 @ 2.48 833.28
 MILEAGE 15.49 x 35 x 2.75 1,490.25

REMARKS:
1st plug @ 1630' pump 4881 H2O mix
100% class A 31 cc displac 5.17 BBI H2O
2nd plug @ 1550' pump 4881 H2O mix
45% class A 31 cc displac 3.61 BBI H2O
3rd plug @ 885' pump 4881 H2O mix
35% class 31 cc displac 1 BBI H2O
4th plug @ 255' mix 150% full all
tubing hook to 5 1/2 cas mix 80% net
cement to surface

DEPTH OF JOB 1630
 PUMP TRUCK CHARGE 1512.25
 EXTRA FOOTAGE @
 MILEAGE Hum 35 @ 7.70 269.25
 MANIFOLD @
Hum 35 @ 4.40 154.00

CHARGE TO: Novy oil
 STREET _____
 CITY _____ STATE _____ ZIP _____

TOTAL 4,259.84
 Disc 20% 851.97

PLUG & FLOAT EQUIPMENT

	@	
	@	
	@	
	@	
	@	

0% TOTAL 0

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.

SALES TAX (If Any) _____
 TOTAL CHARGES 10,980.14
 DISCOUNT 2,196.03 (20/20/0)
 IF PAID IN 30 DAYS
8,784.11

PRINTED NAME Hal K Hess
 SIGNATURE Hal K Hess