



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

KANSAS CORPORATION COMMISSION 1229469
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

ALLIED OIL & GAS SERVICES, LLC 064117

Federal Tax I.D. # 20-8651475

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

SERVICE POINT: Oaklawn, KS

DATE <u>10-4-14</u>	SEC. <u>4</u>	TWP. <u>9</u>	RANGE <u>24</u>	CALLED OUT	ON LOCATION <u>1:30pm</u>	JOB START <u>6:00pm</u>	JOB FINISH <u>6:30pm</u>
LEASE <u>Popp</u>	WELL # <u>1-04</u>	LOCATION <u>Wokooey into Rockline</u>				COUNTY <u>KS</u>	STATE <u>KS</u>
OLD OR NEW (Circle one)			<u>Wto 190, into M, Y & W into</u>			<u>6100am</u>	

CONTRACTOR Maderick 108

TYPE OF JOB Surface

HOLE SIZE 12 1/4 T.D. 274'

CASING SIZE 8 7/8 DEPTH 274'

TUBING SIZE DEPTH

DRILL PIPE DEPTH

TOOL DEPTH

PRES. MAX MINIMUM

MEAS. LINE SHOE JOINT

CEMENT LEFT IN CSG. 15'

PERFS.

DISPLACEMENT 16.58 bbl

OWNER same

CEMENT

AMOUNT ORDERED 180 sty com 39.00
290 gal

COMMON	<u>180 sty</u>	@	<u>17.90</u>	<u>3222.00</u>
POZMIX		@		
GEL	<u>338 #</u>	@	<u>1.50</u>	<u>169.00</u>
CHLORIDE	<u>508 #</u>	@	<u>1.10</u>	<u>558.80</u>
ASC		@		
		@		
		@		
		@		
		@		
		@		
		@		
HANDLING	<u>179.64</u>	@	<u>2.70</u>	<u>482.71</u>
MILEAGE	<u>880 ton X 80 X 2.75</u>			<u>1953.60</u>

EQUIPMENT

PUMP TRUCK CEMENTER Lorance E. Abate

422 HELPER Wayne McGloughy

BULK TRUCK

891/241 DRIVER Chris Madrano (hus)

BULK TRUCK

DRIVER

REMARKS:

Mix 180 sty cement

Displace with water

Cement did circulate

Thank you

CHARGE TO: Colbreath

STREET _____

CITY _____ STATE _____ ZIP _____

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.

PRINTED NAME Deby Kover

SIGNATURE Deby Kover

TOTAL _____

SERVICE

DEPTH OF JOB _____

PUMP TRUCK CHARGE 1512.25

EXTRA FOOTAGE @ _____

MILEAGE 1410 80 @ 7.70 616.00

MANIFOLD @ 275.00

M.L.C.U. 80 @ 4.40 352.00

Wait time 1hr @ _____ 440.00

TOTAL _____

PLUG & FLOAT EQUIPMENT

@ _____

@ _____

@ _____

@ _____

@ _____

TOTAL _____

SALES TAX (If Any) _____

TOTAL CHARGES _____

DISCOUNT _____ IF PAID IN 30 DAYS

Date 10-4-14 District Osage, KS Ticket No. 69117
 Company Calbreath Rig Mojave 108
 Lease Papp Well No. 1-04
 County Osage State KS
 Location 4-9-24 Field _____

CASING DATA: Conductor PTA Squeeze Misc
 Surface Intermediate Production Liner
 Size 8 1/2 Type new Weight 23 1/2 Collar _____

Casing Depths: Top KB Bottom 274'

Drill Pipe: Size _____ Weight _____ Collars _____
 Open Hole: Size 12 1/4 T.D. 274 ft. P.B. to _____ ft.

CAPACITY FACTORS:

Casing: Bbls/Lin. ft. 0.64 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. _____

CEMENT DATA:
 Spacer Type: _____
 Amt. _____ Sks Yield _____ ft³/sk Density _____ PPG

LEAD: Pump Time _____ hrs. Type Com 39%cc
 Excess _____
 Amt. 180 Sks Yield 1.34 ft³/sk Density 15.02 PPG

TAIL: Pump Time _____ hrs. Type _____
 Excess _____

Amt. _____ Sks Yield _____ ft³/sk Density _____ PPG
 WATER: Lead _____ gals/sk Tail _____ gals/sk Total _____ Bbls.

Pump Trucks Used 422-Wayne
 Bulk Equip. 891/310-Chris

Float Equip: Manufacturer _____

Shoe: Type _____ Depth _____

Float: Type _____ Depth _____

Centralizers: Quantity _____ Plugs Top _____ Btm. _____

Stage Collars _____

Special Equip. _____

Disp. Fluid Type Water Amt. 6.58 Bbls. Weight _____ PPG

Mud Type _____ Weight _____ PPG

COMPANY REPRESENTATIVE _____

CEMENTER LaRene

TIME	PRESSURES PSI		FLUID PUMPED DATA			REMARKS
	AM/PM	DRILL PIPE CASING	ANNULUS	TOTAL FLUID	Pumped Per Time Period	
6:00						Hold Safety meeting
						Start water
						Start cement
						weigh cement 3 times 15#
						3# cement
						wash up pump & trips
6:30				30	1358	Dry pipe with water
						cement did circulate
						to collar only
						Hold Safety meeting
						Thank you

ALLIED OIL & GAS SERVICES, LLC 064123

Federal Tax I.D. # 20-8651475

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

SERVICE POINT: Oakley, TX

DATE <u>10-12-14</u>	SEC. <u>4</u>	TWP. <u>9</u>	RANGE <u>24</u>	CALLED OUT	ON LOCATION <u>11:00am</u>	JOB START <u>4:30am</u>	JOB FINISH <u>5:30am</u>
LEASE <u>Popp</u>	WELL # <u>L-4</u>	LOCATION <u>S1/4 Peter 2N, 4E, 5W,</u>			COUNTY <u>Grimes</u>	STATE <u>TX</u>	
OLD OR NEW (Circle one)			<u>3/4E, 5 units.</u>				

CONTRACTOR Maverick 108

TYPE OF JOB PTA

HOLE SIZE 7 7/8 T.D. 4110'

CASING SIZE _____ DEPTH _____

TUBING SIZE _____ DEPTH _____

DRILL PIPE 4 1/2 DEPTH 2175'

TOOL _____ DEPTH _____

PRES. MAX _____ MINIMUM _____

MEAS. LINE _____ SHOE JOINT _____

CEMENT LEFT IN CSG. _____

PERFS. _____

DISPLACEMENT 23.82 661

OWNER Same

CEMENT AMOUNT ORDERED 255 sks 60/40 4% gel

Ver # 110-502

EQUIPMENT

PUMP TRUCK CEMENTER LaRone Edwards

422 HELPER Wayne McElghy

BULK TRUCK DRIVER Wayne Massalle

894/241 DRIVER _____

BULK TRUCK DRIVER _____

_____ DRIVER _____

COMMON	<u>153 sks</u>	@	<u>17.90</u>	<u>2738.70</u>
POZMIX	<u>102 sks</u>	@	<u>9.39</u>	<u>953.70</u>
GEL	<u>877'</u>	@	<u>.50</u>	<u>438.50</u>
CHLORIDE		@		
ASC		@		
	<u>Flow-sap 64#</u>	@	<u>2.97</u>	<u>190.08</u>
		@		
		@		
		@		
		@		
		@		
HANDLING	<u>2738.70 sks</u>	@	<u>2.48</u>	<u>679.20</u>
MILEAGE	<u>11.44 hrs X 63 X 2.25</u>			<u>2044.90</u>

REMARKS:

Mix 50 sks 2175'

Mix 100 sks 975'

Mix 50 sks 325'

Mix 10 sks 40' w/ plug

Mix 155 sks M.I.F.

Mix 30 sks R.I.F.

Thank you

TOTAL _____

CHARGE TO: Colbreath

STREET _____

CITY _____ STATE _____ ZIP _____

SERVICE

DEPTH OF JOB 2175'

PUMP TRUCK CHARGE _____ 2483.59

EXTRA FOOTAGE _____ @ _____

MILEAGE M.I.F. 63 @ 7.70 500.50

MANIFOLD _____ @ _____

M.I.F. 65 @ 4.90 386.00

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.

PLUG & FLOAT EQUIPMENT

wooden plug @ 110.00

_____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

TOTAL _____

PRINTED NAME Derby Keever

SIGNATURE [Signature]

SALES TAX (If Any) _____

TOTAL CHARGES _____

DISCOUNT _____ IF PAID IN 30 DAYS

Date 10-12-14 District Oakley, KS Ticket No. 64123
 Company Calbreath Rig Moderate 108
 Lease Popp Well No. 1-4
 County Graham State KS
 Location 4-9-24 Field _____

CEMENT DATA:

Spacer Type: _____
 Amt. _____ Sks Yield _____ ft³/sk Density _____ PPG _____

CASING DATA: Conductor PTA Squeeze Misc
 Surface Intermediate Production Liner
 Size _____ Type _____ Weight _____ Collar _____

LEAD: Pump Time _____ hrs. Type Lok 10 490g
 Excess _____
 Amt. 255 Sks Yield 1.42 ft³/sk Density 138 PPG _____

TAIL: Pump Time _____ hrs. Type _____
 Excess _____
 Amt. _____ Sks Yield _____ ft³/sk Density _____ PPG _____

WATER: Lead _____ gals/sk Tail _____ gals/sk Total _____ Bbls. _____

Casing Depths: Top _____ Bottom _____

Pump Trucks Used 422 - Wayne

Bulk Equip. 390/241 - Wayne

Drill Pipe: Size 4 1/2 Weight _____ Collars _____
 Open Hole: Size 7 7/8 T.D. 4110 ft. P.B. to 2175' ft.

Float Equip: Manufacturer _____

Shoe: Type _____ Depth _____

Float: Type _____ Depth _____

Centralizers: Quantity _____ Plugs Top _____ Btm. _____

Stage Collars _____

Special Equip. _____

Disp. Fluid Type water/mud Amt. 2383 Bbls. Weight _____ PPG _____

Mud Type 30/2082 Weight _____ PPG _____

CAPACITY FACTORS:

Casing: Bbls/Lin. ft. _____ Lin. ft./Bbl. _____

Open Holes: Bbls/Lin. ft. _____ Lin. ft./Bbl. _____

Drill Pipe: Bbls/Lin. ft. 101422 Lin. ft./Bbl. _____

Annulus: Bbls/Lin. ft. _____ Lin. ft./Bbl. _____

Bbls/Lin. ft. _____ Lin. ft./Bbl. _____

Perforations: From _____ ft. to _____ ft. Amt. _____

COMPANY REPRESENTATIVE Sub

CEMENTER LoRene

TIME	PRESSURES PSI		FLUID PUMPED DATA			REMARKS
	AM/PM	DRILL PIPE CASING	ANNULUS	TOTAL FLUID	Pumped Per Time Period	
4:30					5.0	Hold safety meeting Start water spacer Start cement 50 sks 2175' weigh cement 13.8# stop cement
					3.0	Pump water spacer
					20.82	Displace with mud
					5.0	Start water spacer
						Mix 100 sks cement 975'
						Stop cement
					2.0	Pump water spacer 30 cement
						Mix 50 sks cement 325'
					1.0	Displace with water
						Mix 10 sks 40' w/ spacer
						Mix 15 sks M. 11'
						Mix 30 sks R. 11'
5:30						Wash up truck
						Hold safety meeting
						Thank you