

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

the same are true and correct, so help me God.

KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

1231871

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 #:				API No. 15			
Name:				Spot Description:			
Address 1:				SecTwp S. R EastWest Feet from North / South 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				County:			
Water Supply Well Other: SWD Permit #:				Lease Na	ame:	Well #:_	
ENHR Permit #: Gas Storage Permit #:				Date Well Completed:			
Is ACO-1 filed? Yes No If not, is well log attached? Yes No				The plug	ging proposal was app	proved on:	(Date)
Producing Formation(s): List All (If needed attach another sheet)				by:(KCC District Agent's Name)			
Depth to Top: Bottom: T.D				Plugging Commenced:			
Depth to Top: Bottom: T.D				I Plugging Completed:			
Depth to	o Top: Bott	om:T.D					
			I				
Show depth and thickness of	all water, oil and gas form	nations.					
Oil, Gas or Water Records			Casing F	ing Record (Surface, Conductor & Production)			
Formation	Content	Casing	Size		Setting Depth	Pulled Out	
		ged, indicating where the muc f same depth placed from (bo		•		ods used in introducing	it into the hole. If
Plugging Contractor License #:			Name: _				
Address 1: Ac				2:			
City:				State:		Zip:	+
Phone: ()				-			
Name of Party Responsible for	or Plugging Fees:						
State of	County,			, SS.			
	•				anlovee of Operator of	r Operator on abo	vo-described well
(Print Name)				=[1	inproyee or Operator of	Detailed on about	re-uescribed well,

Submitted Electronically

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

ALLIED OIL & GAS SERVICES, LLC

Federal Tax I.D. # 20-8651475 REMIT TO P.O. BOX 93999 SERVICE POINT: SOUTHLAKE, TEXAS 76092 SEC. TWP. RANGE CALLED OUT ON LOCATION JOB START JOB FINISH Opm COUNTY KING LEASE MOTES &B WELL# QCD OR NEW (Circle one) CONTRACTOR Allience Well Serv **OWNER** TYPE OF JOB Ald hale plug HOLE SIZE T.D. CEMENT **CASING SIZE** AMOUNT ORDERED DEPTH 6 SKCC on side **TUBING SIZE** DEPTH DRILL PIPE DEPTH # 114-15 TOOL DEPTH @ 17.90 PRES. MAX **MINIMUM** COMMON MEAS. LINE SHOE JOINT **POZMIX** @ CEMENT LEFT IN CSG. GEL @ CHLORIDE 330,00 @1.10 DISPLACEMENT ASC H20 @ @. 99 NULLS 200 178. **EQUIPMENT** 3.213. Materials Total 10% 321. **PUMP TRUCK** CEMENTER Josh @ # 366 BULK TRUCK 0 Tracheta @. # 610-120 DRIVER TWS) surce **BULK TRUCK** @_ DRIVER @ 2.48 633.19 HANDLING 255.32 MILEAGE 11.90 X 55 REMARKS: op had saffy meeting On location - Rig 715Ft-505x 3460 715 F+-555x-3%11-200# havis **DEPTH OF JOB** Tagel Comen + @ 680 PUMP TRUCK CHARGE 2249. 4-300 ft corculate to Surface EXTRA FOOTAGE @ Constate 423.50 MILEAGE HUM @7.70 MANIFOLD @ @ 4.10 ~ @ 440.00 CHARGE TO Disc 7072 6.668. 41 STREET. CITY_ STATE_ ZIP_ PLUG & FLOAT EQUIPMENT @ @ @ 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 TOTAL done to satisfaction and supervision of owner agent or Disc Olo contractor. I have read and understand the "GENERAL SALES TAX (If Any) -TERMS AND CONDITIONS" listed on the reverse side. 9.881. TOTAL CHARGES PRINTED NAME DISCOUNT IF PAID IN