

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

1233529

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.

(Print Name) ☐ Employee 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.

Submitted Electronically

Mail to: KCC - Conservation Division, 130 S. Market - Room 2078, Wichita, Kansas 67202



FIELD TICKET & TREATMENT REPORT CEMENT

TICKET NUMBER 47733 ⁷⁷²
LOCATION Oakley, KS ₄₃₃
FOREMAN Kelly Gabel

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
11-7-14	5950	MSJ Penner 28 #3	28	14	30	Gove
CUSTOMER Onsen Resources			Gove			
MAILING ADDRESS			5 to Rd 10 W 54 E in 0			
CITY			STATE	ZIP CODE		
			TRUCK #	DRIVER	TRUCK #	DRIVER
			399	Jordan		
			307	Rob		

JOB TYPE <u>Surface</u>	HOLE SIZE <u>12 1/4</u>	HOLE DEPTH <u>288</u>	CASING SIZE & WEIGHT <u>8 5/8 24#</u>
CASING DEPTH <u>286'</u>	DRILL PIPE _____	TUBING _____	OTHER _____
SLURRY WEIGHT _____	SLURRY VOL _____	WATER gal/sk _____	CEMENT LEFT in CASING <u>20</u>
DISPLACEMENT <u>17661</u>	DISPLACEMENT PSI _____	MIX PSI _____	RATE _____

REMARKS: Safety meeting, rigged up on Maverick 108, broke circulation, mixed 200 SKS Com 390cc 2% gel, displaced with 17 bbl ~~break~~ water, shut in

Thank You
Rilly & crew

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
54015 -	1	PUMP CHARGE	1150 ⁰⁰	1150 ⁰⁰
5400 -	35 mi.	MILEAGE	525	18375
5407A -	9.4	Ton mileage delivery	175	57575
11045 -	200SKS	Class A Cement	1855	3710 ⁰⁰
1102 -	564#	Calcium Chloride	.94	530 ⁴⁶
1118B	376	Bentonite	.27	10153
		Sub:	6251.19	
		10% :	625.12	
		5626.07		
		Sub	6252.68	
		Total 10%	625.07	
			5627.75	
		Sales Tax	308.70	
		ESTIMATED TOTAL	5934.76	

Rayin 3737

AUTHORIZATION 1000 E. Men TITLE _____ DATE 11-7-14

I acknowledge that the payment terms, unless specifically amended in writing on the front of the form or in the customer's account records, at our office, and conditions of service on the back of this form are in effect for services identified on this form.

ALLIED OIL & GAS SERVICES, LLC 055572

Federal Tax I.D.# 20-5975804

REMIT TO P.O. BOX 31
RUSSELL, KANSAS 67665

SERVICE POINT:

Russell KS

DATE <u>11-20-14</u>	SEC. <u>28</u>	TWP. <u>14</u>	RANGE <u>30</u>	CALLED OUT	ON LOCATION	JOB START <u>700 PM</u>	JOB FINISH <u>730 PM</u>
LEASE <u>Penner</u>	WELL # <u>3</u>	LOCATION <u>Gove KS 105 9 W 5 into</u>			COUNTY <u>Gove</u>	STATE <u>KS</u>	
OLD OR <u>NEW</u> (Circle one)							

CONTRACTOR Maverick 108

TYPE OF JOB PTA

HOLE SIZE 7 7/8 T.D. 4650

CASING SIZE 8 5/8 DEPTH 286

TUBING SIZE DEPTH

DRILL PIPE 4 1/2 DEPTH 2270

TOOL DEPTH

PRES. MAX MINIMUM

MEAS. LINE SHOE JOINT

CEMENT LEFT IN CSG.

PERFS.

DISPLACEMENT

OWNER

CEMENT

AMOUNT ORDERED 255 60/40 49 gal

1/4 # 10

COMMON	@	
POZMIX	@	
GEL	@	
CHLORIDE	@	
ASC	@	
<u>60/40 49 gal 255</u>	@	<u>18.72 4824.60</u>
<u>1/4 # 10 62</u>	@	<u>2.97 184.14</u>

<u>Material</u>	@	<u>5008.74</u>
<u>Disc</u>	@	<u>1001.74</u>

HANDLING <u>255</u>	@	<u>2.48 632.40</u>
MILEAGE <u>456</u> <u>1/m</u>	@	<u>2.75 1254.00</u>

TOTAL 12995.74

REMARKS:

- p1 50 sks @ 2270
- p2 100 sks @ 1300
- p3 50 sks @ 280
- p4 10 sks @ 40
- 15 sks in mouse hole
- 30 sks in rat hole

Thank you !!!

CHARGE TO: O'Brien Resources

STREET _____

CITY _____ STATE _____ ZIP _____

SERVICE

DEPTH OF JOB	<u>2270</u>
PUMP TRUCK CHARGE	<u>2558.75</u>
EXTRA FOOTAGE	@
MILEAGE <u>40</u> <u>LVMJ</u>	@ <u>4.40 176.00</u>
MANIFOLD	@
<u>80</u> <u>HVMT</u>	@ <u>7.20 616.00</u>

Disc 1047.43 TOTAL 5237.15

PLUG & FLOAT EQUIPMENT

<u>8 5/8 Wooden plug</u>	@	<u>110.00 11000</u>
	@	
	@	
	@	
	@	

Disc 22.00 TOTAL 110.00

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 Todd E. Mersch

SIGNATURE Todd E. Mersch

SALES TAX (If Any) _____

TOTAL CHARGES 10355.89

DISCOUNT 2091.18 20% IF PAID IN 30 DAYS

net 8284.72