



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

KANSAS CORPORATION COMMISSION 1234801
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.

(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

Date 12-10-14 District Russell Ticket No. 055401
 Company Tekon Explor LLC Rig Alliance
 Lease Huelbut Well No. 1
 County Carroll State Ks
 Location N-Wakeham To Rd Field _____
Line W-180, 2-N 1/2-E, S-10-10

CASING DATA: Conductor PTA Squeeze Misc
 Surface Intermediate Production Liner

Size _____ Type _____ Weight _____ Collar _____

CEMENT DATA:

Spacer Type: _____
 Amt. _____ Sks Yield 1.42 ft³/sk Density 13.8 PPG
 LEAD: Pump Time _____ hrs. Type _____
 Excess _____
 Amt. _____ Sks Yield _____ ft³/sk Density _____ 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 _____

Drill Pipe: Size _____ Weight _____ Collars _____
 Open Hole: Size _____ T.D. _____ ft. P.B. to _____ ft.

CAPACITY FACTORS:

Casing: Bbls/Lin. ft. .0162 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 2600' ft. to 2150' ft. Amt. _____
Depth 1050'

Pump Trucks Used _____
 Bulk Equip. _____
 Float Equip: Manufacturer _____
 Shoe: Type _____ Depth _____
 Float: Type _____ Depth _____
 Centralizers: Quantity _____ Plugs Top _____ Btm. _____
 Stage Collars _____
 Special Equip. _____
 Disp. Fluid Type _____ Amt. _____ Bbls. Weight _____ PPG
 Mud Type _____ Weight _____ PPG

COMPANY REPRESENTATIVE Tom Breems

CEMENTER Allen Worth

TIME	PRESSURES PSI		FLUID PUMPED DATA			REMARKS
	DRILL PIPE CASING	ANNULUS	TOTAL FLUID	Pumped Per Time Period	RATE Bbls Min.	
1030 AM						on loc. discuss safety set up phase Rig Running 235 lbs
	200# 76		25 Bbl cement 7 Bbl H ₂ O		3	76' @ 3800 1st Plug, 100 SKs 60/40 4% d.O. 100# Hulls, 125 Bbl Slur, 7 Bbl H ₂ O
1140 AM	200# 76		25 Bbl cement 5 Bbl H ₂ O		3	76' @ 2500 2nd Plug, 100 SKs 60/40 4% gel 100# Hulls
1220 PM	200#		31.6 Bbl cement 1 Bbl H ₂ O		3	76' @ 1117 3rd Plug, 125 SKs 60/40 4% gel, 100# Hulls - cement ckt to surface
1245 PM						Pull Tag out of Hole
1170 AM						out of hole w/Tag, Rig down to dig out Broyden Head
200 PM			6 Bbl cement		1/2	Fill 4 1/2" Csg mix 25 SKs 60/40 gel 4% gel
215	25		12.6 Bbls			Wash up to Broyden Head mix 50 SKs 60/40 for 240 gals, max 75 PSI wash up
1530						Job completed
						Job complete Thanks

FINAL DISP. PRESS. _____ PSI BUMP PLUG TO _____ PSI BLEEDBACK _____ BBLs THANK YOU

ALLIED OIL & GAS SERVICES, LLC 055401

Federal Tax I.D.# 20-5975804

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

SERVICE POINT:
Russell

DATE <u>12-10-14</u>	SEC <u>21</u>	TWP. <u>9</u>	RANGE <u>24</u>	CALLED OUT <u>800 AM</u>	ON LOCATION <u>1030</u>	JOB START	JOB FINISH
LEASE <u>Hurlbut</u>	WELL # <u>1</u>	LOCATION <u>Wakeeny N- To Redline</u>			COUNTY <u>Grant</u>	STATE <u>KS</u>	
OLD OR NEW (Circle one)		west to 180-2-N, 1/2-E, S-106					

CONTRACTOR Alliance
 TYPE OF JOB PTA Old well
 HOLE SIZE _____ T.D. _____
 CASING SIZE 4 1/2 DEPTH _____
 TUBING SIZE 2 3/8 DEPTH _____
 DRILL PIPE _____ DEPTH _____
 TOOL _____ DEPTH _____
 PRES. MAX _____ MINIMUM _____
 MEAS. LINE _____ SHOE JOINT _____
 CEMENT LEFT IN CSG. _____
 PERFS. _____
 DISPLACEMENT _____

OWNER _____
 CEMENT AMOUNT ORDERED 400 sks 60/90
POZ 470 gel
400 sks \$ 3314.00
6640 poz 470 gel
 COMMON _____ @ _____
 POZMIX _____ @ _____
 GEL _____ @ _____
 CHLORIDE _____ @ _____
 ASC _____ @ _____
Hulls 500 @ 4.95 \$ 2475.00
 HANDLING @ 248 \$ 997.00
 MILEAGE 866 TH 52.5 @ 4.30 \$ 3717.75
 TOTAL _____

EQUIPMENT

PUMP TRUCK # 417 CEMENTER Alfred Heath
 HELPER Danny Skinner
 BULK TRUCK # 481 DRIVER Ben Griffin
 BULK TRUCK # _____ DRIVER _____

REMARKS:
PTA old well - see Cementing log

CHARGE TO: Tex Kan Exploration LLC
 STREET _____
 CITY _____ STATE _____ ZIP _____

SERVICE

DEPTH OF JOB 3800'
 PUMP TRUCK CHARGE \$ 2558.75
 EXTRA FOOTAGE @ _____
 MILEAGE heavy @ 5 \$ 25.00
 MANIFOLD 1 Light @ 220.00 \$ 220.00
 TOTAL _____

PLUG & FLOAT EQUIPMENT

_____ @ _____
 _____ @ _____
 _____ @ _____
 _____ @ _____
 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.

PRINTED NAME Tom Brown
 SIGNATURE _____

SALES TAX (If Any) _____
 TOTAL CHARGES _____
 DISCOUNT 11 IF PAID IN 30 DAYS
\$ 19,937.81