

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

1240761

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	5				
Name:					Spot Description:				
Address 1:					Sec	Twp S. R	EastWest		
Address 2:					Feet from	North / Sc	outh Line of Section		
City: State: + Contact Person:					Feet from East / West Line of Section				
					Footages Calculated from Nearest Outside Section Corner:				
Phone: ()					NE NW	SE SW			
Type of Well: (Check one)			dic	County: _					
Water Supply Well	Other:	SWD Permit #:	Lease Name: Well #: Date Well Completed:						
ENHR Permit #:	Gas Sto	rage Permit #:							
Is ACO-1 filed? Yes	No If not, is well	l log attached? Yes	No	1		proved on:			
Producing Formation(s): List A		sheet)		by:		(KCC D	istrict Agent's Name)		
Depth to	•	m: T.D		Plugging (Commenced:				
Depth to Top: Bottom: T.D					Plugging Completed:				
Depth to	Top: Botto	m: T.D							
Show depth and thickness of a		ations.		5 //2 /					
·	, Gas or Water Records			Record (Surface, Conductor & Production)					
Formation	Content	Casing	Size		Setting Depth	Pulled Out			
Describe in detail the manner cement or other plugs were us	. 00			•		ods used in introducir	ig it into the hole. If		
Plugging Contractor License #: Name									
Address 1:			_ Addres	s 2:					
City:				_ State:		Zip:	+		
Phone: ()				_					
Name of Party Responsible fo	r Plugging Fees:								
State of	County, _			, ss.					
				Fm	plovee of Operator of	r Operator on ab	ove-described well		

Submitted Electronically

(Print Name)

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

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 064592 Federal Tax I.D. # 20-8651475

REMIT TO P.O. B SOUT		EXAS 760	092		Liberal 15S					
DATE /-/4-15	SEC.	TWP.	RANGE	CALLED OUT	ON LOCATION	JOB START	JOB FINISH 2:00m			
LEASE HORTON	WELL#	70-1	LOCATION VEC	Deer Field HS)	COUNTY	STATE S			
OLD OR NEW (C)		ا دد	LOCATION VI	par man -		1	17,0			
OLD ORINEW (C.		789	,							
CONTRACTOR	Sa	x son 7	£146	OWNER						
TYPE OF JOB	PA	}		CEMENT						
HOLE SIZE	25%	7.I	D. EPTH	- AMOUNT OR	EDERED <u>2/0S</u>	4 60-41	2 4% 901			
CASING SIZE TUBING SIZE	000		EPTH	AMOUNT ON	DERED OFFICE	1 00 10				
DRILL PIPE	41%	0.775000	EPTH							
TOOL		DE	EPTH							
PRES. MAX			NIMUM				_>-			
MEAS. LINE		SH	IOE JOINT		and the same of th	@				
CEMENT LEFT I	N CSG.			GEL						
PERFS. DISPLACEMENT		11170)	CHLORIDE _ ASÇ						
DISPLACEMENT		UIPMEN	r is	60HO 496g	el alosk		3973.20			
ä.	EQ	UIPIVIISIA	ı	0		_				
DUI AD TOUGH	CEMEN	TER /	nn . B			@				
PUMPTRUCK #SY9-SSO		Alex								
BULK TRUCK	TILLI LI	1/16.8	<u> </u>							
#705-642	DRIVER	Gre	gory B.	X						
BULK TRUCK							1,-0			
#	DRIVER									
Well AFE GL Office Date	3549 406 354 7000 4/0	196 2206 2206 1-14	35-1) . KS :-15	DEPTH OF JUDIE PUMP TRUCE SUPPLY PUMP TRUCE SUPP	K CHARGE	2001	3000 143, 78 0 368:60 0 220:60 140:00 8 550:66			
CHARGE TO:		Ener	54	Drayage.	467.56	TOTA	S 129/12 AL S030.7			
STREET _ GC	x 250)		0.01		102.				
CITY Holcom	08	STATE	KS ZIP (67)	1651	PLUG & FLOA	AT EQUIPMI	en't			
				(@				
To: Allied Oil &	& Gas Ser	vices, LL	C.				_			
			ementing equipme	ent —			-			
and furnish cen	enter and	l helper(s) to assist owner o	r —		@				
contractor to do	work as	is listed.	The above work von of owner agent	was		TOTA	AL			
contractor. I ha	ve read a	nd unders	stand the "GENER	RAL	(If April)					
TERMS AND	CONDIT	IONS" lis	ted on the reverse		the Ally)	03.90				
	1.1		,	TOTAL CHA	ARGES 45 70	05.70				
PRINTED NAM	E Ker	ria Sc	Alberro	DISCOUNT	\$ 6032.0	_ IFP	AID IN 30 DAY			
SIGNATURE _	Kul	1 Sa			14 UU 50.1	יע				