



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

KANSAS CORPORATION COMMISSION 1242699
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

Date 11-17-14 District 6B Ticket No. 65141
 Company AMEX LLC Rig Exact Well Serv
 Lease PP Well No. 28-1
 County Stanton State KY
 Location Johannsen City 4B 2601 Field 28 25 41

CEMENT DATA:
 Spacer Type: Fresh H₂O
 Amt. 5661 Sk Yield _____ ft³/sk Density _____ PPG

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

LEAD: Pump Time Thickener hrs. Type 60/40 4% gel
 Excess _____
 Amt. _____ Sk Yield 1.41 ft³/sk Density 15.2 PPG

Casing Depths: Top _____ Bottom 1600

TAIL: Pump Time _____ hrs. Type _____
 Excess _____
 Amt. _____ Sk Yield _____ ft³/sk Density _____ PPG
 WATER: Lead _____ gals/sk Tail _____ gals/sk Total _____ Bbls.

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

Pump Trucks Used 390 - Dan Casper
 Bulk Equip. 610 - 170 - Jaxx Inc.

CAPACITY FACTORS:
 Casing: Bbls/Lin. ft. _____ 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. _____

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 _____

CEMENTER Josh Kace

TIME	PRESSURES PSI		FLUID PUMPED DATA			REMARKS
	AM/PM	DRILL PIPE CASING	ANNULUS	TOTAL FLUID	Pumped Per Time Period	
						on location - big up
						had safety meeting
						run 4 1/2 4 1/2
						run 15 sk gel
9:30 AM						#1 - 1600 ft. 5" 5/8 x 60/40 4% - 100# hauls
10:30 AM						#2 - 800 4" 1/2 x 60/40 4%
11 AM						#3 - 40 - circulate 25 sk to surface
						cement did circulate
11:30 AM						log down

ALLIED OIL & GAS SERVICES, LLC 065141

Federal Tax I.D. # 20-8651475

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

SERVICE POINT: Great Bend

DATE <u>11-19-14</u>	SEC. <u>28</u>	TWP. <u>29</u>	RANGE <u>411</u>	CALLED OUT	ON LOCATION <u>Am</u>	JOB START <u>11:00</u>	JOB FINISH <u>11:30 AM</u>
LEASE <u>OP</u>	WELL# <u>20-1</u>	LOCATION <u>Johnson City 4 1/2 to Rd 10</u>			COUNTY <u>3 Texas</u>	STATE <u>TX</u>	
OLD OR NEW (Circle one)		<u>2W 1/2 S units</u>					

CONTRACTOR Expert Well Services
 TYPE OF JOB Old hole plug
 HOLE SIZE 4 1/2 T.D.
 CASING SIZE 4 1/2 DEPTH 1600
 TUBING SIZE DEPTH
 DRILL PIPE DEPTH
 TOOL DEPTH
 PRES. MAX MINIMUM
 MEAS. LINE SHOE JOINT
 CEMENT LEFT IN CSG. All
 PERFS.
 DISPLACEMENT Fresh H2O

OWNER
 CEMENT
 AMOUNT ORDERED 115 5X 60/40 4 1/2
15 5X gel on side
100 # hauls

EQUIPMENT
 PUMP TRUCK CEMENTER Josh Isaac
 # 366 HELPER Dan Casper
 BULK TRUCK
 # 610-170 DRIVER Jose Tracheta (TWS)
 BULK TRUCK
 # DRIVER

COMMON	@		
POZMIX	@		
GEL	@	<u>1500</u>	<u>.50</u> <u>750.00</u>
CHLORIDE	@		
ASC	@		
<u>115 5X 60/40 + 4 1/2</u>	@	<u>18.92</u>	<u>2.175.80</u>
<u>100 # Hauls</u>	@	<u>.99</u>	<u>99.00</u>
<u>Materials Total</u>			<u>3.024.80</u>
<u>Dice</u>			<u>28%</u> <u>846.94</u>
<u>Service</u>			
<u>Handling</u>			<u>157.17</u> @ <u>2.48</u> <u>389.78</u>
<u>Mileage</u>			<u>6.37 x 50 x</u> <u>2.75</u> <u>871.75</u>

REMARKS:

On location - Rig up - well safety meeting
Ran 4 1/2 casing
Pump 5061 H2O
mix 15 5X gel
#1 - 505X 60/40 4 1/2 gel 100 # hauls @ 1600 Ft
#2 - 405X 60/40 4 1/2 gel @ 800 Ft
#3 - 25 5X 60/40 4 1/2 gel @ 40 Ft.
Cement did circulation
Rig down - 11:15 AM

DEPTH OF JOB
 PUMP TRUCK CHARGE 1512.25
 EXTRA FOOTAGE @
 MILEAGE Hum 50 @ 7.70 385.00
 MANIFOLD @
 @
 @

CHARGE TO: Borexco LLC
 STREET _____
 CITY _____ STATE _____ ZIP _____

TOTAL 2.773.78
Dice 28% 776.69

PLUG & FLOAT EQUIPMENT

_____	@	_____
_____	@	_____
_____	@	_____
_____	@	_____
_____	@	_____

TOTAL 0
Dice 0%

SALES TAX (If Any) _____
 TOTAL CHARGES 5.798.58
28% 1.623.60 (28/28/0)
 DISCOUNT _____ IF PAID IN 30 DAYS

4.174.98

Thank you!
 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 X
 SIGNATURE X [Signature]