



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

KANSAS CORPORATION COMMISSION 1243707
OIL & GAS CONSERVATION DIVISION
WELL PLUGGING RECORD
 K.A.R. 82-3-117

Form CP-4
 March 2009

Type or Print on this Form
Form must be Signed
All blanks must be Filled

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

ALLIED OIL & GAS SERVICES, LLC 065004

Federal Tax I.D. # 20-8651475

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

SERVICE POINT:
Med Lodge KS

DATE <u>2/13/15</u>	SEC. <u>27</u>	TWP. <u>33</u>	RANGE <u>22</u>	CALLED OUT	ON LOCATION <u>1000 AM</u>	JOB START <u>1015 AM</u>	JOB FINISH <u>1100 AM</u>
LEASE <u>Bardie</u>	WELL # <u>274^W</u>	<u>1-27</u>	LOCATION <u>Sitka Jet 3 miles West</u>	COUNTY <u>Clarke</u>	STATE <u>KS</u>		
<input checked="" type="radio"/> OLD OR NEW (Circle one)							

CONTRACTOR ~~St. Anne~~ Alliance W/S
 TYPE OF JOB OHF
 HOLE SIZE 7 7/8 T.D. _____
 CASING SIZE 8 7/8 DEPTH 601
 TUBING SIZE 2 3/8 DEPTH 949
 DRILL PIPE _____ DEPTH _____
 TOOL _____ DEPTH _____
 PRES. MAX 300 MINIMUM _____
 MEAS. LINE _____ SHOE JOINT _____
 CEMENT LEFT IN CSG. _____
 PERFS. _____
 DISPLACEMENT Fresh
 EQUIPMENT _____

OWNER Berex Co
 CEMENT
 AMOUNT ORDERED 15 sk Gel,
120 sk 60:40:4% Gel
 COMMON _____ @ _____
 POZMIX _____ @ _____
 GEL 1500#s @ 1.05 1575.00
 CHLORIDE _____ @ _____
 ASC _____ @ _____
60/40/4 class A 120sk @ 18.92 2270.40
 _____ @ _____
 _____ @ _____
 _____ @ _____
 _____ @ _____
 _____ @ _____
 _____ @ _____
 HANDLING _____ @ _____
 MILEAGE _____

PUMP TRUCK CEMENTER Jason Thinesch
 # 558/302 HELPER Robert Johnson
 BULK TRUCK
 # 391/252 DRIVER Kindal Holman
 BULK TRUCK
 # _____ DRIVER _____

REMARKS:

3590 = 1345.89 TOTAL 3845.40

SERVICE

DEPTH OF JOB _____
 PUMP TRUCK CHARGE _____ 1225.00
 EXTRA FOOTAGE _____ @ _____
 MILEAGE 50mi @ 7.70 385.00
 MANIFOLD _____ @ _____
Handling 151.88 cuft @ 2.48 376.66
Drayage 305.82 ton-mi @ 2.75 841.00

3590 = 989.68 TOTAL 2827.66

PLUG & FLOAT EQUIPMENT

NA

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

TOTAL _____

SALES TAX (if Any) _____

TOTAL CHARGES 6673.06

DISCOUNT _____ IF PAID IN 30 DAYS

Net 4337.50

CHARGE TO: Berex Co
 STREET _____
 CITY _____ STATE _____ ZIP _____

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 Berex W. Hill

SIGNATURE [Signature]