



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

KANSAS CORPORATION COMMISSION 1244110
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

GLOBAL CEMENTING, L.L.C.

1580

REMIT TO 18048 170RD
RUSSELL, KS 67665

SERVICE POINT:

Russell, KS

| | | | | | | | |
|---|------------------|----------|-------|------------|-------------|-----------|-----------------|
| DATE <i>2-4-14</i> | SEC. | TWP. | RANGE | CALLED OUT | ON LOCATION | JOB START | JOB FINISH |
| LEASE <i>Martin</i> | WELL #. <i>2</i> | LOCATION | | | COUNTY | STATE | <i>12:30 pm</i> |
| <input type="radio"/> OLD OR NEW (CIRCLE ONE) | | | | | | | |

CONTRACTOR *Pratt Well Service*
TYPE OF JOB *PTA*
HOLE SIZE _____ T.D. _____
CASING SIZE *5 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 _____

EQUIPMENT

PUMP TRUCK CEMENTER *Heath - Brael*
P1 HELPER *Mark*
BULK TRUCK _____
B1 DRIVER *Austin*
BULK TRUCK _____
_____ DRIVER _____

REMARKS:

*1st Plug @ 1260' = 225sx and 50#
hulls - cement circulated to surface
Come out of hole with tubing and put
swedge on and pump 40sx - shut in @ 200ps.
Work up to 850' and pump 25sx - pressure
up to 300 ps.*

CHARGE TO: *Pratt Well Serv*
STREET _____
CITY _____ STATE _____ ZIP _____

Global Cementing, L.L.C.,
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 *Jimmy Oliver*
SIGNATURE _____

OWNER _____
CEMENT AMOUNT ORDERED *290sx 60/40 4% gel*
COMMON _____ @ _____
POZMIX _____ @ _____
GEL _____ @ _____
CHLORIDE _____ @ _____
ASC _____ @ _____
HANDLING _____ @ _____
MILEAGE _____ @ _____
TOTAL _____

SERVICE

DEPTH OF JOB _____
PUMP TRUCK CHARGE _____
EXTRA FOOTAGE _____ @ _____
MILEAGE *18* _____ @ _____
MANIFOLD _____ @ _____
TOTAL _____

PLUG & FLOAT EQUIPMENT

_____ @ _____
50# hulls _____ @ _____
_____ @ _____
_____ @ _____
TOTAL _____

SALES TAX (If Any) _____
TOTAL CHARGES _____
DISCOUNT _____ IF PAID IN 30 DAYS