



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

KANSAS CORPORATION COMMISSION 1250982
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

ALLIED OIL & GAS SERVICES, LLC 064703

Federal Tax I.D. # 20-8651475

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

SERVICE POINT: Oakley, KS

DATE <u>4-16-15</u>	SEC. <u>21</u>	TWP. <u>1</u>	RANGE <u>36</u>	CALLED OUT	ON LOCATION <u>2:00pm</u>	JOB START <u>5:30am</u>	JOB FINISH <u>6:30am</u>
LEASE <u>Judy</u>	WELL # <u>1-21</u>	LOCATION <u>McDonald N to AA</u>			COUNTY <u>Rawlins</u>	STATE <u>KS</u>	
OLD OR <u>NEW</u> (Circle one)		<u>34 E, N into</u>					

CONTRACTOR Beredes 10

TYPE OF JOB PTA

HOLE SIZE 2 7/8 T.D. 4350'

CASING SIZE _____ DEPTH _____

TUBING SIZE _____ DEPTH _____

DRILL PIPE 4 1/2 DEPTH 3166'

TOOL _____ DEPTH _____

PRES. MAX _____ MINIMUM _____

MEAS. LINE _____ SHOE JOINT _____

CEMENT LEFT IN CSG. _____

PERFS. _____

DISPLACEMENT 37.91 bbl

OWNER Same

CEMENT

AMOUNT ORDERED 255 SB 6440, 420 gel
1/4 # flo-sed

COMMON	@	_____	_____
POZMIX	@	_____	_____
GEL	@	_____	_____
CHLORIDE	@	_____	_____
ASC	@	_____	_____
<u>60/90/4</u>	@	<u>255 SB</u>	@ <u>18.92</u> <u>4824.60</u>
<u>flor-sed</u>	@	<u>64#</u>	@ <u>2.87</u> <u>190.08</u>
<u>Material Total</u>	@		<u>504.68</u>
<u>(2005.88/40%)</u>	@		
HANDLING	@	<u>273.87 ft³</u>	@ <u>2.48</u> <u>679.20</u>
MILEAGE	@	<u>11.44 tank 50x</u>	@ <u>2.79</u> <u>1593.00</u>
			TOTAL _____

EQUIPMENT

PUMP TRUCK # 422 CEMENTER Lakene Edwards

BULK TRUCK # 818/287 HELPER Wayne McGibby

BULK TRUCK # _____ DRIVER Darren Racette

BULK TRUCK # _____ DRIVER _____

REMARKS:

Mix 50 SB 3166'

Mix 100 SB 2383'

Mix 50 SB 353'

Mix 20 SB 40' w/ plug

Plug m.d. 15 SB

Plug R.H. 30 SB

Thank you.

CHARGE TO: Berexco

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 Gilbert Davila Sr

SIGNATURE [Signature]

SERVICE

DEPTH OF JOB 3166'

PUMP TRUCK CHARGE _____ 2600.47

EXTRA FOOTAGE @ _____

MILEAGE MIFO 50 @ 7.70 385.00

MANIFOLD MFCU 50 @ 4.40 NC

(2095.06/40%) TOTAL 5,237.67

PLUG & FLOAT EQUIPMENT

Wooden plug @ _____ 110.00

_____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

(44.00/40%) TOTAL 110.00

SALES TAX (If Any) _____

TOTAL CHARGES 10,362.35

DISCOUNT 4,144.94 (40%) IF PAID IN 30 DAYS

6,217.41 Net.

Date 4-16-15 District Oakley, KS Ticket No. 64703
 Company Borex Co Rig Beredco 10
 Lease Judy Well No. 1-21
 County Roubidoux State KS
 Location 21-1-36 Field _____
McDonald rd to AA-34E, Nw 1/4

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

Casing Depths: Top _____ Bottom _____

Drill Pipe: Size 4 1/2 Weight _____ Collars _____
 Open Hole: Size 7 7/8 T.D. 4550 ft. P.B. to 3166 ft.

CAPACITY FACTORS:

Casing: Bbls/Lin. ft. _____ Lin. ft./Bbl. _____
 Open Holes: Bbls/Lin. ft. _____ Lin. ft./Bbl. _____
 Drill Pipe: Bbls/Lin. ft. 0.422 Lin. ft./Bbl. _____
 Annulus: Bbls/Lin. ft. _____ Lin. ft./Bbl. _____
 Bbls/Lin. ft. _____ Lin. ft./Bbl. _____
 Perforations: From _____ ft. to _____ ft. Amt. _____

CEMENT DATA:

Spacer Type: _____
 Amt. _____ Skys Yield _____ ft³/sk Density _____ PPG _____

LEAD: Pump Time _____ hrs. Type 60/40 49 gel
1 qt # flo-seal Excess _____

Amt. 255 Skys Yield 1.42 ft³/sk Density 13.8 PPG _____

TAIL: Pump Time _____ hrs. Type _____
 Excess _____

Amt. _____ Skys Yield _____ ft³/sk Density _____ PPG _____

WATER: Lead _____ gals/sk Tail _____ gals/sk Total _____ Bbls. _____

Pump Trucks Used 422 - Wayne

Bulk Equip. 818/287 - Darren

Float Equip: Manufacturer _____

Shoe: Type _____ Depth _____

Float: Type _____ Depth _____

Centralizers: Quantity _____ Plugs Top _____ Btm. _____

Stage Collars _____

Special Equip. _____

Disp. Fluid Type water/mud Amt. 329 Bbls. Weight _____ PPG _____

Mud Type 3.0 / 34.91 Weight _____ PPG _____

COMPANY REPRESENTATIVE _____

CEMENTER LaRene

TIME	PRESSURES PSI		FLUID PUMPED DATA			REMARKS
	DRILL PIPE CASING	ANNULUS	TOTAL FLUID	Pumped Per Time Period	RATE Bbls Min.	
5:30				50		Start cement Hotel Safety meeting Start water spacer Start cement 50 sks 3166' weight cement 13.8 # Stop cement Pump water spacer Displace with mud Start water spacer Start cement 100 sks 2383' Stop cement Pump water spacer Displace with mud Start cement 50 sks 3531' Displace with water Mix 10 sks 401 w/ plug Plug M.H. 15 sks Plug R.H. 30 sks Wash up pump & lines
6:30						

Thank you
 [Signature]

Hold Safety meeting