

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

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

KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

1251034

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 #:			APIN	API No. 15					
Name:				Spot Description:					
Address 1:				Sec Twp S. R East West					
Address 2:				Feet from North / South Line of Section					
City:	State:	Zip:+		Feet from East / West Line of Section					
Contact Person:			Foota	Footages Calculated from Nearest Outside Section Corner:					
Phone: ()				☐ NE ☐ NW ☐ SE ☐ SW					
Type of Well: (Check one) (Che	Other: Gas Sto	SWD Permit #:	Lease	County: Well #: Well #:					
Is ACO-1 filed? Yes	_	log attached? Yes		The plugging proposal was approved on: (Date)					
Producing Formation(s): List A					(KCC District Agent's Name)				
•	•	m: T.D	I Plugo	Plugging Commenced:					
•		m: T.D	Plugg	ging Completed:					
Depth to	5 TOP BOILO	m: T.D							
Show depth and thickness of	all water, oil and gas forma	ations.	'						
Oil, Gas or Water	r Records		Casing 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 introducing it into the hole. If				
Plugging Contractor License #	# :		Name:						
Address 1:			Address 2:						
City:			State:		Zip:+				
Phone: ()									
Name of Party Responsible for	or Plugging Fees:								
State of	County		SS						
-				F	0				
	(Print Name)			Employee of Operator or	Operator on above-described well,				

Submitted Electronically

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

Federal Tax I.D. #20-5975804

065533

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

SERVICE POINT:

5.163.87 IF PAID IN 30 DAYS

SOUT	HLAKE,	TEXAS 76	5092				Great Beard KS		
ATE 04-09-15	SEC.	TWP.	RANGE /8	CALLED OUT	ON LOC.		JOB START	JOB FINISH	
STEPHENS EASE FILLS	WELL#	3	LOCATION I-70	To Comme	me PIT	- T	COUNTY Ellis	STATE	
LD OR NEW (Ci			1/2 Epst No		C+ No IC	<i>y</i> _ (4/12		
(3,			1/8 KKST 100	SFIL INTO					
ONTRACTOR		en al		OWNER					
YPE OF JOB									
	12		2750	_ CEMENT				Company	
ASING SIZE			PTH	_ AMOUNT	ORDERED.	360:	5×65/40	4%	
UBING SIZE	139	DE	PTH 3600					7863	
RILL PIPE		DE	PTH	_ used a	151 5x 6	0/40	4%		
OOL	·	DE	PTH	_					
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IEAS. LINE		SH	OE JOINT	POZMIX			@		
EMENT LEFT II	N CSG.	9/1		_ GEL	Flei			Of sector	
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6/0/170	DRIVER	MARIY	N Spangenbe	19 bnele	0/476 Gel	(4.0a)	@	EMENT MAIL	
ULK TRUCK					July Book age	otto:TV	@	TARATUSARS	
N.	DRIVER				c Feet Civ	27770	TOTA	T 2. 541. 4	
RIG REN 36	60-fit	C TOS			380.6		@2.48	943.99	
2-3600 ft 1					16.10 X			1328.2	
3 1100 ft 6	2/60	X NOO F	1.11-		TOB 37		ROSIVA	EMENT SUP	
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TREET							TOTA	L 4,147.	
16 STORES - STORES	NAME OF THE OWNER O		in the second	-			MIVE	" 1 5/11	
TY	S	TATE	ZIP	_		DIS	COUNT NO	% 1.866-	
					PLUG & FLOAT EQUIPMENT				
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o: Allied Oil &	Gae Sam	vices TT		*					
			ementing equipment						
			to assist owner or				@		
			The above work wa		Subtotal		@		
			n of owner agent or		disale 5		TOTA	Louision	
contractor. I ha	ve read ar	nd underst	and the "GENERA	L			40 D	C OSHIVO	
TERMS AND C	CONDITI	ONS" list	ed on the reverse sid	de. triuomA salio		DI	SCOUNT		
				SALES TA	X (If Any)		ELIME	A. IF AUCUL	
	Dian	, K	11 60 11 11	TOTAL	HARGES_	9. 39	(4. 90	TAKE DISCU	
PRINTED NAME PON BOWMAN						225	01	700	
				DISCOUN	T 4.	225	. <u></u> IF P	AID IN 30 DAYS	

NET TOTAL

SIGNATURE On Bown