



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

KANSAS CORPORATION COMMISSION 1251253
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



CEMENTING LOG

STAGE NO.

Date 4/13/15 District Mt. Lemoore KS Ticket No. 65023
 Company Chesapeake Rig Alliance
 Lease Acres 3 Well No. 1-18
 County Kingman State KS
 Location Vic Zenda KS Field _____

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

CASING DATA: Conductor PTA Squeeze Misc
 Surface Intermediate Production Liner
 Size 8 5/8 Type _____ Weight 43.7 Collar _____

LEAD: Pump Time _____ hrs. Type Class A 3%
 Amt. _____ Skys Yield 1.17 ft³/sk Density 15.6 PPG
 TAIL: Pump Time _____ hrs. Type _____

Casing Depths: Top _____ Bottom 407

Amt. _____ Skys Yield _____ ft³/sk Density _____ PPG
 WATER: Lead 5.2 gals/sk Tail _____ gals/sk Total _____ Bbls.

2 3/8 - 1356

Pump Trucks Used 548/545
 Bulk Equip. 814/823

Drill Pipe: Size _____ Weight _____ Collars _____
 Open Hole: Size 7 7/8 T.D. _____ ft P.B. to _____ ft.

Float Equip: Manufacturer _____
 Shoe: Type _____ Depth _____

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: 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 Jason Thinsell

TIME	PRESSURES PSI		FLUID PUMPED DATA			REMARKS
	DRILL PIPE CASING	ANNULUS	TOTAL FLUID	Pumped Per Time Period	RATE Bbls Min.	
						On loc safety rig up safety Wat on Water
945 AM	1500		14 BBL	4	24	Probe test
950 AM	450		30 BBL	4	4	Pump 30 BBL Fluid
1000 AM	275		7 1/2 BBL	3 1/2	3 1/2	Mix + Pump 35% cement slurry
	175		5 BBL	3	3	Displace 1356 (706 1232) Pull to 909 Clean line on pump
1045 AM	250		7 1/2 BBL	4	4	Mix + Pump 35% cement slurry
	250		3 BBL	4	4	Displace 909 (706 785) Pull to 448
1105 AM	200		334 BBL	4	4	Mix + Pump 160 cc cement slurry line cement to surface from 448

FINAL DISP. PRESS: _____ PSI BUMP PLUG TO _____ PSI BLEEDBACK _____ BBLs. THANK YOU
 MILLER PRINTERS, INC. - Geol Serv, KS

ALLIED OIL & GAS SERVICES, LLC 065023

Federal Tax I.D. # 20-8651475

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

SERVICE POINT:
Med Lodge KS

DATE <u>4/13/15</u>	SEC.	TWP.	RANGE	CALLED OUT	ON LOCATION <u>9:00 AM</u>	JOB START <u>9:45 AM</u>	JOB FINISH <u>11:30 AM</u>
LEASE <u>Messenger</u> WELL # <u>1-18</u>				LOCATION <u>Zenda KS, East of 10th Rd,</u>		COUNTY <u>Kingman</u>	STATE <u>KS</u>
OLD OR NEW (Circle one)				<u>1/2 South, West into</u>			

CONTRACTOR <u>Alliance</u>
TYPE OF JOB <u>OHP</u>
HOLE SIZE <u>7 7/8</u> T.D. <u>1356</u>
CASING SIZE <u>8 1/2</u> DEPTH <u>4107</u>
TUBING SIZE DEPTH
DRILL PIPE DEPTH
TOOL DEPTH
PRES. MAX MINIMUM
MEAS. LINE SHOE JOINT
CEMENT LEFT IN CSG.
PERFS.
DISPLACEMENT <u>Fresh H₂O</u>

EQUIPMENT	
PUMP TRUCK CEMENTER <u>Jason Thimack</u>	
# <u>548/545</u> HELPER <u>Justin Bowers</u>	
BULK TRUCK	
# <u>819/823</u> DRIVER <u>Kindel Hatman</u>	
BULK TRUCK	
# DRIVER	

REMARKS:

CHARGE TO: Chesapeake Energy
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 Keith Thibault
SIGNATURE [Signature]

OWNER Chesapeake Energy

CEMENT
AMOUNT ORDERED 230 sk Class A + 3%ecc

COMMON <u>Class A</u> 230 sk @ <u>17.90</u>	<u>4117.00</u>
POZMIX @	
GEL @	
CHLORIDE <u>648 #s</u> @ <u>1.10</u>	<u>712.80</u>
ASC @	
HANDLING @	
MILEAGE @	
TOTAL <u>4829.80</u>	

SERVICE	
DEPTH OF JOB <u>1356</u>	
PUMP TRUCK CHARGE	<u>1250.00</u>
EXTRA FOOTAGE <u>LV33448</u> @ <u>4.40</u>	<u>145.20</u>
MILEAGE <u>33.70</u> @ <u>7.70</u>	<u>259.10</u>
MANIFOLD @	
<u>Handling 2414 cft</u> @ <u>2.48</u>	<u>598.67</u>
<u>Drayage 367.4 tons</u> @ <u>2.75</u>	<u>1010.35</u>
TOTAL 3258.32 <u>3258.32</u>	

PLUG & FLOAT EQUIPMENT	
<u>NA</u>	<u>0</u>
@	
@	
@	
@	
@	
TOTAL _____	

SALES TAX (If Any) _____
TOTAL CHARGES 3088.17
DISCOUNT _____ IF PAID IN 30 DAYS

Net: 5870.90
[Signature]

LOG-TECH OF KANSAS, INC.

P.O. BOX 885
GREAT BEND, KANSAS 67530
(620) 792-2167

INVOICE

8454

Date 4-8-15

CHARGE TO: Chesapeake Energy, Inc.
 ADDRESS _____
 R/A SOURCE NO. _____ CUSTOMER ORDER NO. AEE #
 LEASE AND WELL NO. Messinger "B" # 1-18 FIELD _____
 NEAREST TOWN _____ COUNTY Wagon STATE KS
 SPOT LOCATION NW-NE-2nd SEC. 17 TWP. 302 RANGE _____
 ZERO _____ CASING SIZE 5.5" WEIGHT _____
 CUSTOMER'S T.D. _____ LOG TECH _____ FLUID LEVEL 200'
 ENGINEER L. Spitz OPERATOR Paul D. Miller

PERFORATING				
Description	No. Shots	Depth		Amount
		From	To	

DEPTH AND OPERATIONS CHARGES					
Description	From	Depth To	Total No. Ft.	Price Per Ft.	Amount
<u>Jump 2 weeks cement plug</u>					<u>120.00</u>

MISCELLANEOUS		
Description	Quantity	Amount
<u>Service Charge</u>	<u>1</u>	<u>550.00</u>
<u>5 1/2" WT CLIP DB-5</u>	<u>1</u>	<u>750.00</u>

PRICES SUBJECT TO CORRECTION BY BILLING DEPARTMENT

RECEIVED THE ABOVE SERVICES ACCORDING TO THE TERMS AND CONDITIONS SPECIFIED ON THE REVERSE SIDE TO WHICH WE HEREBY AGREE.

Sub Total	<u>2372.56</u>
Code Ref. Tool Insurance	
Tax	
Total	<u>2273.00</u>

Customer Signature _____ Date _____