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

KANSAS CORPORATION COMMISSION

OIL & GAS CONSERVATION DIVISION

1251715

March 2009 Type or Print on this Form Form must be Signed All blanks must be Filled

Form CP-4

WELL PLUGGING RECORD K.A.R. 82-3-117

| OPERATOR: License #: | API No. 15 |
|---|--|
| Name: | Spot Description: |
| Address 1: | |
| Address 2: | Feet from North / South Line of Section |
| City: State: Zip: + | Feet from East / West Line of Section |
| Contact Person: | Footages Calculated from Nearest Outside Section Corner: |
| Phone: () | NE NW SE SW |
| Type of Well: (Check one) Oil Well Gas Well OG D&A Cathodic Water Supply Well Other: SWD Permit #: SWD Permit #: SWD Permit #: ENHR Permit #: Gas Storage Permit #: Gas Storage Permit #: No Is ACO-1 filed? Yes No If not, is well log attached? Yes No Producing Formation(s): List All (If needed attach another sheet) | County: Well #: Lease Name: Well #: Date Well Completed: The plugging proposal was approved on: (Date) by: (KCC District Agent's Name) Plugging Commenced: Plugging Completed: |
| Depth to Top: Bottom:T.D | |

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 | |
| | | | | | | |
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| | | | | | | |

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: | Name: | | | | | | | |
|---------------------------------------|---|---|---------------------------|----------------------|--|--|--|--|--|--|
| Address 1: | | Address 2: | | | | | | | | |
| City: | | State: | Zip: | + | | | | | | |
| Phone: () | | | | | | | | | | |
| Name of Party Responsible for Plug | gging Fees: | | | | | | | | | |
| State of | County, | , SS. | | | | | | | | |
| | (Print Name) | | or or Operator on abo | | | | | | | |
| haing first duly sugars an asthe says | That I have be availed as a fith a factor | statements, and matters barain contained, and the l | on of the chour departhed | wall in an filed and | | | | | | |

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



TREATMENT REPORT

| | Acid Stage No. | | | |
|----------|----------------|--------------|--|--|
| no Fluid | Sand Siza | Rounds of So | | |

| | | 1 | Type Treatment: | Amt. | | Туря | e Fluid | Sand Size | Pound | s of Sand |
|-------------------------------|----------------|-----|---------------------|----------------|----------|--------|---------|-----------|---------|-----------|
| Date 4/21/2015 District | F.O. No. 41208 | | Bkdown | Bt | ol./Gał. | _ | | | | |
| Company LD DRILLING | | | | Bi | ol./Gal. | | | | | |
| Well Name & No. SALVINO 3-19 | | | | Bt | ol./Gal. | | | | | |
| Location Field | | | | Bł | ol./Gal. | | | | | |
| County BARTON State K | 5 | | Flush | Bi | ol./Gal. | _ | | | | |
| | | | Treated from | | | ft. to | | ft. | No. ft. | 0 |
| Casing: Size 5 1/2 Type & Wt. | Set at | ft. | from | | | ft. to | | ft. | No. ft. | 0 |
| Formation: Perf. | to | | from | | | ft. to | | ft, | No. ft. | 0 |
| Formation: Perf. | to | | Actual Volume of O | iil / Water to | Load Ho | le: | | | | Bbl./Gal. |
| Formation: Perf. | to | | | | | | | | | |
| Liner: Size Type & Wt. Top at | ft. Bottom at | ft. | Pump Trucks. 🕴 | No. Used: S | td | 318 | Sp | | | |
| Cemented: Perforated from | ft. to | ft. | Auxiliary Equipmen | rt | | | 317-3 | 08 | | |
| Tubing: Size & Wt. Swung at | | ft. | Personnel BRANE | DON SCOT | T AND | MIKE | | | | _ |
| Perforated fromft. | to | ft. | Auxiliary Tools | | | | | | _ | |
| | | | Plugging or Sealing | Materials: | Түре | | | | | |
| Open Hole Size T.D | ft. P.B. to | ft. | | | | | | Gals | | .dl |

| 1 | | | 1 | | |
|---|--|------------------------------|-------------|---|--|
| TIME PRESSURES a.m./p.m. Tubing Casing 1:30 | | PRESSURES Total Fluid Pun | | REMARKS | |
| | | | ON LOCATION | | |
| 1.50 | | | 1 | | |
| | | | | PUMP 125 SKS 60/40 4% W/ 200# HULLS AT 1450' | |
| | | | | | |
| | | | | PUMP 50 SKS 60/40 4% W/ 100# HULLS AT 950' | |
| | | | | | |
| | | | | PUMP 50 SKS 60/40 4% W/ 100# HULLS AT 650' | |
| | | | | | |
| | | | | CIRCULATE CEMENT TO SURFACE FROM 350' W/ 75 SKS | |
| | | | | | |
| | | | | THANKS | |
| | | | | BRANDON | |
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