



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

KANSAS CORPORATION COMMISSION 1252832
 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

ALLIED OIL & GAS SERVICES, LLC 064161

Federal Tax I.D. # 20-8651475

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

SERVICE POINT:

Osage, KS

DATE <u>3-25-15</u>	SEC. <u>27</u>	TWP. <u>1.5</u>	RANGE <u>36W</u>	CALLED OUT	ON LOCATION <u>11:00am</u>	JOB START <u>12:30pm</u>	JOB FINISH <u>1:30pm</u>
LEASE <u>Theresa</u>	WELL# <u>127</u>	LOCATION <u>McDonald N to Rd Z,</u>			COUNTY <u>Rawlins</u>	STATE <u>KS</u>	
OLD OR NEW (Circle one) <u>NEW</u>				<u>1/2 E; N+E into</u>			

CONTRACTOR Berevo IO
TYPE OF JOB PTA
HOLE SIZE 7 7/8 T.D. 4650'
CASING SIZE _____ DEPTH _____
TUBING SIZE _____ DEPTH _____
DRILL PIPE 4 1/2 DEPTH 3060'
TOOL _____ DEPTH _____
PRES. MAX _____ MINIMUM _____
MEAS. LINE _____ SHOE JOINT _____
CEMENT LEFT IN CSG. _____
PERFS. _____
DISPLACEMENT 5 bbl 400 30 bbl mud
EQUIPMENT _____
PUMP TRUCK # 402 CEMENTER Paul Beaver
HELPER Brandon Wilkinson
BULK TRUCK # 890/241 DRIVER George Grant
BULK TRUCK # _____ DRIVER _____

OWNER Same
CEMENT AMOUNT ORDERED 255 sks Lite
60/40/4 1/2 gel 1/4# Flo-seal

COMMON	_____ @ _____	
POZMIX	_____ @ _____	
GEL	_____ @ _____	
CHLORIDE	_____ @ _____	
ASC	_____ @ _____	
<u>Lite</u>	<u>255 sks</u> @ <u>18.92</u>	<u>4824.60</u>
<u>Flo-seal</u>	<u>64 #</u> @ <u>2.97</u>	<u>190.08</u>
	_____ @ _____	
<u>Material Total</u>	_____ @ _____	<u>5014.68</u>
	_____ @ _____	
	_____ @ _____	
	_____ @ _____	
HANDLING	<u>273.87 #</u> @ <u>2.48</u>	<u>679.20</u>
MILEAGE	<u>11.44 hrs @ 2.75</u>	<u>31.46</u>
TOTAL		

REMARKS:

mix 50 sks @ 3060'; Displace w/ mud
mix 100 sks @ 2970'; Displace w/ mud
mix 50 sks @ 360'
mix 10 sks w/ plug @ 40'
mix 30 sks in R.H.
mix 15 sks in M.H.

*Thank You!
Paul + crew*

CHARGE TO: Berevo IIe
STREET _____
CITY _____ STATE _____ ZIP _____

SERVICE

DEPTH OF JOB	<u>3060'</u>	
PUMP TRUCK CHARGE	<u>2600.47</u>	
EXTRA FOOTAGE	_____ @ _____	
MILEAGE	<u>MIAI 50</u> @ <u>7.70</u>	<u>385.00</u>
MANIFOLD	_____ @ _____	
<u>MILV 50</u>	@ <u>4.40</u>	<u>N/C</u>
	_____ @ _____	
	_____ @ _____	
<u>(2095.06/40%)</u>		TOTAL <u>5,237.67</u>

PLUG & FLOAT EQUIPMENT

<u>8 5/8 Wooden Plug</u>	@	<u>110.00</u>
_____	@	_____
_____	@	_____
_____	@	_____
_____	@	_____
		TOTAL <u>110.00</u>

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 Dail Jr
SIGNATURE Daniel O. [Signature]

SALES TAX (if Any)	_____	
TOTAL CHARGES	<u>10,362.35</u>	
DISCOUNT	<u>4,100.94 (40%)</u>	IF PAID IN 30 DAYS
	<u>6,261.41 Net</u>	



CEMENTING LOG

STAGE NO. _____

Date 3-25-15 District Oakley, KS Ticket No. 64161
 Company Berexco Rig Berexco 10
 Lease 4th rise Well No. 1-27
 County Rawlins State KS
 Location 27-1-36 Field _____

CEMENT DATA:
 Spacer Type: water
 Amt. _____ Sks Yield _____ ft³/sk Density _____ PPG _____

LEAD: Pump Time _____ hrs. Type _____
 Excess _____

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

TAIL: Pump Time _____ hrs. Type 60/40 4/4 gel
1/4 # F 16 seal Excess _____

Amt. 255 Sks Yield 1.42 ft³/sk Density 13.82 PPG _____

WATER: Lead 6.9 gals/sk Tail _____ gals/sk Total _____ Bbls. _____

Pump Trucks Used 422 - Brandon
 Bulk Equip. 890/211 - George

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 _____ T.D. 4100 ft. P.B. to 3060 ft.

CAPACITY FACTORS:

Casing: Bbls/Lin. ft. _____ Lin. ft./Bbl. _____
 Open Holes: Bbls/Lin. ft. _____ Lin. ft./Bbl. _____
 Drill Pipe: Bbls/Lin. ft. 0.1422 Lin. ft./Bbl. _____
 Annulus: Bbls/Lin. ft. _____ Lin. ft./Bbl. _____
 Bbls/Lin. ft. _____ Lin. ft./Bbl. _____
 Perforations: From _____ ft. to _____ ft. Amt. _____

Float Equip: Manufacturer _____

Shoe: Type _____ Depth _____

Float: Type _____ Depth _____

Centralizers: Quantity _____ Plugs Top _____ Btm. _____

Stage Collars _____

Special Equip. 8 5/8 wooden plug

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

Mud Type 5/32 Weight _____ PPG _____

COMPANY REPRESENTATIVE _____

CEMENTER Paul B

TIME AM/PM	PRESSURES PSI		FLUID PUMPED DATA			REMARKS
	DRILL PIPE CASING	ANNULUS	TOTAL FLUID	Pumped Per Time Period	RATE Bbls Min.	
			5	5		Hold Safety meeting pump water spacer mix 50 sks @ 1300' @ 14 # wash up pump + lines Displace w/ mud pump water spacer mix 100 sks @ 270' @ 14 # wash up pump + lines Displace w/ mud mix 50 sks @ 360' @ 13.5 # mix 10 sks @ 40' w/ plug mix 30 sks in R.H. mix 15 sks in M.H.
			8	13		
			5	18		
			30	48		
			5	53		
			16	69		
			5	74		
			13	87		
			8	95		
			2	97		
			5	102		
			3	105		

FINAL DISP. PRESS: _____ PSI BUMP PLUG TO _____ PSI BLEEDBACK _____ BBLs. THANK YOU