



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

KANSAS CORPORATION COMMISSION 1253464
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 055770

Federal Tax I.D.# 20-5975804

REMIT TO P.O. BOX 31
RUSSELL, KANSAS 67665

SERVICE POINT:
Russell KS

Schwartz

DATE <u>5-22-15</u>	SEC. <u>2</u>	TWP. <u>1</u>	RANGE <u>3E</u>	CALLED OUT	ON LOCATION	JOB START <u>12:30 AM</u>	JOB FINISH <u>1:00 AM</u>
LEASE <u>Schwartz</u>		WELL # <u>3-2</u>	LOCATION <u>Berkeley 15.5 N 7 W</u>		COUNTY <u>Rawlins</u>	STATE <u>KS</u>	
OLD OR <u>NEW</u> (Circle one)			<u>15 Winto</u>				

CONTRACTOR Berardo #2

TYPE OF JOB PTA

HOLE SIZE 7 7/8 T.D. 4414

CASING SIZE 8 7/8 DEPTH 300

TUBING SIZE DEPTH

DRILL PIPE 4 1/2 16.6 DEPTH 3069

TOOL DEPTH

PRES. MAX MINIMUM

MEAS. LINE SHOE JOINT

CEMENT LEFT IN CSG.

PERFS.

DISPLACEMENT

OWNER

CEMENT

AMOUNT ORDERED 255 60/40 48 gal

1/4 #5/10

COMMON	@		
POZMIX	@		
GEL	@		
CHLORIDE	@		
ASC	@		
<u>60/40 48 gal 255</u>	@	<u>15.80</u>	<u>3952.50</u>
<u>Flow seal 64#</u>	@	<u>2.97</u>	<u>190.08</u>
	@		
	@		
<u>Material</u>	@		<u>4142.58</u>
<u>Disc</u>	@	<u>1657.03</u>	
	@		
	@		
HANDLING <u>255 sks</u>	@	<u>2.48</u>	<u>632.40</u>
MILEAGE <u>275 sks</u>	@	<u>2.75</u>	<u>756.25</u>

TOTAL ...

SERVICE

DEPTH OF JOB		<u>3069</u>
PUMP TRUCK CHARGE		<u>2558.75</u>
EXTRA FOOTAGE	@	
MILEAGE <u>100 Hvac</u>	@	<u>7.70 770.00</u>
MANIFOLD	@	
<u>100 LV</u>	@	<u>N/C</u>
	@	

Disc 1886.96 TOTAL 4717.40

PLUG & FLOAT EQUIPMENT

<u>1 3/4 Wooden plug</u>	@	<u>110.00</u>	<u>110.00</u>
	@		
	@		
	@		
	@		

Disc 44.00 TOTAL 110.00

SALES TAX (If Any) _____

TOTAL CHARGES 8969.98

DISCOUNT 3587.99 (40%) IF PAID IN 30 DAYS

NET \$ 5381.99

REMARKS:

p1 50 sks @ 3069

p2 100 sks @ 2232

p3 50 sks @ 372

p4 10 sks @ 40

RH 30 sks

MH 15 sks

KCC #99996

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 _____

SIGNATURE David A Patterson

Date: 8-22-15 District: Russell Ticket No. 55770
 Company: Beridco Rig: Beridco
 Lease: Schweidert Well No. 3-2
 County: Rawlins State: KS
 Location: Bowdley 15 N 2 W Field: _____
NS Wind

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

Casing Depths: Top _____ Bottom _____

Drill Pipe: Size _____ Weight _____ Collars _____
 Open Hole: Size 7 7/8 T.D. 4414 ft. P.B. to _____ ft.

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. _____

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

LEAD: Pump Time _____ hrs. Type 6440 490 gel
1/4" x 5/16" Excess _____
 Amt. 255 Sks Yield 1.92 ft³/sk Density 13-8 PPG _____

TAIL: Pump Time _____ hrs. Type _____
 Excess _____
 Amt. _____ Sks Yield _____ ft³/sk Density _____ PPG _____
 WATER: Lead 688 gals/sk Tail _____ gals/sk Total _____ Bbls. _____

Pump Trucks Used 409 Tracy J
 Bulk Equip. 410 Ben G

Float Equip: Manufacturer _____
 Shoe: Type _____ Depth _____
 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 DAVID A RATERSON

CEMENTER [Signature]

TIME	PRESSURES PSI		FLUID PUMPED DATA			REMARKS
	AM/PM	DRILL PIPE CASING	ANNULUS	TOTAL FLUID	Pumped Per Time Period	
<u>8 a.m.</u>						<u>on location - safety meeting</u>
		<u>500</u>		<u>12.65</u>		<u>pump 50 skts @ 3069</u>
		<u>200</u>		<u>1 1/2</u>		<u>displace H2O</u>
				<u>40</u>		<u>displace mud from rig</u>
		<u>100</u>		<u>25.29</u>		<u>mix 100 skts @ 2232</u>
		<u>100</u>		<u>1 1/2</u>		<u>displace water</u>
				<u>2.3</u>		<u>displaced with mud</u>
		<u>100</u>		<u>12.65</u>		<u>mix 50 skts @ 372</u>
		<u>100</u>		<u>1.5</u>		<u>displace H2O</u>
		<u>0</u>		<u>2.5</u>		<u>mix 10 skts @ 40'</u>
		<u>0</u>		<u>7.59</u>		<u>mix 30 skts in Rathole</u>
		<u>0</u>		<u>4.91</u>	<u>3</u>	<u>mix 15 skts in Mouse hole</u>