



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

KANSAS CORPORATION COMMISSION 1257142
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 65304

Federal Tax I.D. # 20-8681475

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

SERVICE POINT: Liberia, KS #21

DATE <u>05-11-15</u>	SEC. <u>7</u>	TWP. <u>34</u>	RANGE <u>26</u>	CALLED OUT	ON LOCATION	JOB START <u>11:00am</u>	JOB FINISH <u>1:30pm</u>
LEASE <u>Classen</u>		WELL# <u>1-7</u>	LOCATION <u>Mead KS South on Hwy 23</u>		COUNTY <u>Mead</u>	STATE <u>KS.</u>	
<input checked="" type="radio"/> OLD OR NEW (Circle one)			to CRV East 11 miles, to Cr 2 South into				

CONTRACTOR Berexco / Alliance well 5. OWNER _____

TYPE OF JOB Plug ATA

HOLE SIZE _____ T.D. _____

CASING SIZE _____ DEPTH _____

TUBING SIZE 2 7/8 DEPTH 5850'

DRILL PIPE _____ DEPTH _____

TOOL _____ DEPTH _____

PRES. MAX _____ MINIMUM _____

MEAS. LINE _____ SHOE JOINT _____

CEMENT LEFT IN CSG. _____

PERFS. _____

DISPLACEMENT 30 BBL H₂O

EQUIPMENT _____

PUMP TRUCK CEMENTER Aldo Espinoza

531-541 HELPER Jesus Garcia

BULK TRUCK _____

705-842 DRIVER Gregory Randall

BULK TRUCK _____

_____ DRIVER _____

CEMENT

AMOUNT ORDERED 30 SK Class A common

COMMON <u>30 SK</u>	@	<u>17.90</u>	<u>537.00</u>
POZMIX _____	@	_____	_____
GEL _____	@	_____	_____
CHLORIDE _____	@	_____	_____
ASC _____	@	_____	_____
<u>Cottonseed Hulls 100 #</u>	@	<u>0.99</u>	<u>99.00</u>
_____	@	_____	_____
_____	@	_____	_____
_____	@	_____	_____
_____	@	_____	_____
_____	@	_____	_____
_____	@	_____	_____
HANDLING _____	@	_____	_____
MILEAGE _____	@	_____	_____

286.20 / 45% TOTAL 636.00

Thank you! REMARKS: _____

CHARGE TO: Berexco LLC

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 Berry Walters

SIGNATURE Berry Walters

SERVICE

DEPTH OF JOB _____		
PUMP TRUCK CHARGE <u>1 @</u>	<u>2810.84</u>	
EXTRA FOOTAGE <u>LUM 50 @</u>	<u>4.40</u>	<u>220.00</u>
MILEAGE <u>HUM 50 @</u>	<u>7.70</u>	<u>385.00</u>
MANIFOLD <u>Swedge 1 @</u>	<u>168.75</u>	<u>168.75</u>
<u>Handling .30 @</u>	<u>2.48</u>	<u>74.40</u>
<u>Drayage 70.80 @</u>	<u>2.75</u>	<u>193.88</u>

1733.80 / 45% TOTAL 3852.87

PLUG & FLOAT EQUIPMENT

_____	@	_____
_____	@	_____
_____	@	_____
_____	@	_____
_____	@	_____

TOTAL 0

SALES TAX (If Any) _____

TOTAL CHARGES 4,488.87

DISCOUNT 2020: 00/45% IF PAID IN 30 DAYS

Net - 2,468.87



CEMENTING LOG

Date 5/15/2015 District Liberal # 21 Ticket No. 65473
 Company Berexco Rig Alliance Well Service
 Lease Classen Well No. 1-7
 County Meade State KS

Location _____
 Field _____

Casing Data Conductor FTA Squeeze Misc.
 Surface Intermediate Production Liner

Size 8 5/8 Type _____ Weight 24 Collar _____

Casing Depths Top _____ Bottom _____

Drill Pipe: BBLs/LIN. FT _____ LIN. FT/BBL _____
 Open Hole: BBLs/LIN. FT _____ LIN. FT/BBL _____
 Capacity Factors: BBLs/LIN. FT _____ LIN. FT/BBL _____
 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 _____
 BBLs/LIN. FT _____ LIN. FT/BBL _____
 Perforations From _____ ft to _____ ft Amt _____

CEMENT DATA

Spacer Type water
 Amt. _____ Skys Yield _____ ft³/sk Density _____ PPG

LEAD: Time _____ hrs. Type 60/40 4% Gel

Amt. 160 Skys Yield 1.42 ft³/sk Density 13.8 PPG

TAIL: Time _____ hrs. Type Gel

Amt. 10 Skys Yield _____ ft³/sk Density _____ PPG

WATER Lead 6.8 Gal/sk Tail _____ Gal/sk Total _____ BBLs

Pump Trucks Used: 774-654

Bulk Equipment 705-642

Float Equipment: Manufacturer _____

Shoe: Type _____ Depth _____

Float: Type _____ Depth _____

Centralizers: Quantity _____ Plugs Top _____ Bottom _____

Stage Collars _____

Special Equipment _____

Disp: Fluid Type _____ Amt _____ bbls Weight _____ PPG

Mud Type _____ Weight _____

COMPANY REPRESENTATIVE George Br...

CEMENTER Lenny Baeza

TIME	PRESSURES PSI		FLUID PUMPED DATA			REMARKS
	DRILL PIPE CASING	ANNULUS	TOTAL FLUID	PUMPED PER TIME PERIOD	RATE BBLs/MIN	
9:30am						On location @ 9:30am
10:20am						Safety meeting with company man
10:30am	0		30		3	Pumping 30 bbls of water ahead of cement to see returns
10:40am	200		42		3	Mixing 50sk plug @ 1441'
10:45am	50		49		2	Displacement of 7 bbls of water behind it
10:50am	0		49		0	Plug balanced out and pulling out to 150' from surface and pumping Intel cement to surface
12:30pm	40		25		3	Filling up hole with water
12:40pm	100					Mixing 110sk of cement to get cement to surface
12:48pm	40		53		3	rest of cement to get cement to surface after pulling 150 of 2 7/8 tubing
2:00pm						Washed up pumping lines and tubing leaving location @ 2:00pm
150						

FINAL DISP. PRESS. 700 PSI BUMP PLUG TO 1200 PSI BLEEDBACK 0.5 BBLs THANK YOU

ALLIED OIL & GAS SERVICES, LLC 065441

Federal Tax I.D. # 20-8651475

TO P.O. BOX 93999
SOUTHLAKE, TEXAS 76092

SERVICE POINT:
Liberal KS

DATE <i>6-02-15</i>	SEC <i>7</i>	TWP. <i>34</i>	RANGE <i>26</i>	CALLED OUT	ON LOCATION	JOB START <i>11:00 AM</i>	JOB FINISH <i>12:00 PM</i>
LEASE <i>Clussen</i>		WELL # <i>1-7</i>		LOCATION <i>Mark KS section 23 block</i>		COUNTY <i>Meade</i>	STATE <i>KS</i>
<input checked="" type="radio"/> OLD OR NEW (Circle one)				to CR.V East face? Gas? South into			

CONTRACTOR

TYPE OF JOB *PIA*

HOLE SIZE _____ T.D. _____

CASING SIZE _____ DEPTH _____

TUBING SIZE _____ DEPTH _____

DRILL PIPE _____ DEPTH _____

TOOL _____ DEPTH _____

PRES. MAX _____ MINIMUM _____

MEAS. LINE _____ SHOE JOINT _____

CEMENT LEFT IN CSG. _____

PERFS. _____

DISPLACEMENT _____

OWNER

CEMENT AMOUNT ORDERED *Class A Neat*

EQUIPMENT

PUMP TRUCK CEMENTER *Justin Talley*

903-501 HELPER *Robert Chavez*

BULK TRUCK DRIVER *Justin Talley*

955-554 DRIVER _____

_____ DRIVER _____

COMMON <i>60 DR</i>	@	<i>17.90</i>	<i>1074.00</i>
POZMIX	@		
GEL	@		
CHLORIDE	@		
ASC	@		
	@		
	@		
	@		
	@		
	@		
	@		
	@		
HANDLING	@		
MILEAGE <i>429.60 / 40%</i>			
			TOTAL <i>1074.00</i>

Thank You! REMARKS:

CHARGE TO: *Benexco LLC*

STREET _____

CITY _____ STATE _____ ZIP _____

SERVICE

DEPTH OF JOB _____

PUMP TRUCK CHARGE *1 @* *2483.59*

EXTRA FOOTAGE *4.40 / M 50 @* *4.40* *220.00*

MILEAGE *7.70 / M 50 @* *7.70* *285.00*

MANIFOLD _____ @ _____

Handling 1 event @ 350.00

Drayage 100 @ 2.75 275.00

1497.44 / 40%

TOTAL *3713.59*

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 *Amara Wilson*

SIGNATURE *Amara Wilson*

PLUG & FLOAT EQUIPMENT

_____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

TOTAL *0*

SALES TAX (If Any) _____

TOTAL CHARGES *4817.59*

DISCOUNT *1927.04 / 40%* IF PAID IN 30 DAYS

Net - *2890.55*

KWilson@benexco.com