



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

KANSAS CORPORATION COMMISSION 1264889
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

810 E 7TH
 PO Box 92
 EUREKA, KS 67045
 (620) 583-5561



Cement or Acid Field Report
 Ticket No. 2544
 Foreman Rick Ledford
 Camp Eureka KS

| Date | Cust. ID # | Lease & Well Number | Section | Township | Range | County | State |
|---------------------------------------|-------------|---------------------|----------------------------------|---------------|--------------------|--------|--------|
| 9-17-15 | 1102 | Homestead #1 | | | | Sumner | KS |
| Customer Endeavor Energy Resources | | | Safety Meeting RL CB AM | Unit # 102 | Driver Chris G. | Unit # | Driver |
| Mailing Address P.O. Box 40 | | | | 112 | Alan M. | | |
| City Delaware | State OK | Zip Code 74027 | | | | | |

Job Type O.T.A Hole Depth _____ Slurry Vol. _____ Tubing 2 3/8"
 Casing Depth _____ Hole Size _____ Slurry Wt. _____ Drill Pipe _____
 Casing Size & Wt. _____ Cement Left in Casing _____ Water Gal/SK _____ Other _____
 Displacement _____ Displacement PSI _____ Bump Plug to _____ BPM _____

Remarks: Safety meeting. Rig up to 2 3/8" tubing @ 280' mixed 125 sks 60/40
Pozmix cement w/ 4% gel. pull tubing out, topped well off w/ 15 sks cement.
Job complete rig down.

"Thank You"

| Code | Qty or Units | Description of Product or Services | Unit Price | Total |
|--------|--------------|------------------------------------|------------|---------|
| C105-2 | 1 | Pump Charge | 650.00 | 650.00 |
| C107 | 0 | Mileage | 3.95 | n/c |
| C203 | 140 sks | 60/40 Pozmix cement | 12.75 | 1785.00 |
| C206 | 480# | 4% gel | .20 | 96.00 |
| C10815 | 6.02 | tax mileage back tax | 1.35 | 650.16 |
| | | | <i>771</i> | |
| | | | Subtotal | 3181.16 |
| | | | Sales Tax | 222.68 |
| | | | Total | 3403.84 |

Authorization Witnessed by Gus Myers Title Co. Lp

I agree to the payment terms and conditions of services provided on the back of this job ticket. Any amendments to payment terms must be in writing on the front of this job ticket or in the Customer's records at ELITE's office.

Date: 08-26-2015 G.L.

Ticket Number: 116-001238

| CUSTOMER INFORMATION | |
|----------------------|----------------------------------|
| Customer Name: | <u>ENI-CORP ENERGY RESOURCES</u> |
| Invoice Address: | |
| Contact: | <u>MR GUS AYLES</u> |
| Phone: | |
| Fax: | |

| WELL INFORMATION | |
|-----------------------|---------------------------|
| Well Name and Number: | <u>SECTION 2-755-K-20</u> |
| Well Description: | |
| Well Status: | |
| Well Type: | |

| WELL BORE INFORMATION | | | | |
|-----------------------|------------------|----------------|-------------------|---------------------|
| Casing Size: | Casing Weight: | Casing Depth: | Type Fluid: | Field Level: |
| <u>4.5"</u> | | | <u>OIL</u> | <u>1500'</u> |
| Operator: | Riggers: | Top Of Cement: | Total Guns/Shots: | Purchase Order No.: |
| <u>WILLIAMS</u> | <u>TECHNICAL</u> | | <u>1</u> | |

(SIGNATURE HEREIN IS ACCEPTANCE OF TERMS AND CONDITIONS PRINTED ON REVERSE SIDE)

I have read and understand terms and conditions as outlined on reverse of this page.

[Signature]

Customer's Authorized Representative Signature

| DESCRIPTION | AMOUNT |
|-------------------------------------|----------------|
| <u>TRAILER</u> | |
| <u>SET 4.5" CAST IRON BRIDGES</u> | |
| <u>PLUG AT 3450'</u> | |
| <u>DRILL 2 SACKS CEMENT ON PLUG</u> | |
| <u>PERFORATED 2 HOLES IN 4.5"</u> | |
| <u>CASING AT 251' WITH 3.125"</u> | |
| <u>SLICK GUIN</u> | |
| | <u>2875.00</u> |
| | <u>227.50</u> |
| | <u>2647.50</u> |

PRICES SHOWN ARE ESTIMATES AND SUBJECT TO CHANGE BY ACCOUNTING DEPARTMENT DISCOUNTS DO NOT APPLY TO CHECKS RETURNED INSUFFICIENT FUNDS



REMIT TO: P.O. BOX 160 • SKIATOOK, OK 74070 • (918) 396-3331 • FAX (918) 396-3393