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

1269881

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 #:	API No. 15
Name:	Spot Description:
Address 1:	Sec Twp S. R East West
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 SWD Permit #:	County: Well #: Lease Name: Well #:
Is ACO-1 filed? Yes No If not, is well log attached? Yes No	The plugging proposal was approved on: (Date)
Producing Formation(s): List All (If needed attach another sheet)	by: (KCC District Agent's Name)
Depth to Top: Bottom: T.D	Plugging Commenced:
Depth to Top: Bottom: T.D	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	

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 Pluggi	ing Fees:							
State of	County,	, SS.						
	(Print Name)	Employee of Operat	or or Operator on a	above-described well,				
haing first duly sworn on ooth sover T	"hat I have knowledge of the factor	statements, and matters herein contained, and the l	og of the above deceriby	ad wall is as 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

Mike's Testing & Salvage Inc.

DBA Kelso Well Service P.O. Box 467

Date	Invoice #
10/15/2015	15189

Bill To

L.D. Drilling, Inc. 7 SW 26th Avenue Great Bend, Kansas 67530

		P.O. No.	County	Lease
		Jamie - Rig #3	Pratt	Trinkle 1-33 OWWO
Qty	Qty Description		Rate	Amount
	Hours Rig Time Casing Knife Sacks Cement 10-12-15 Set in on location, Excel Wireline set Bridg sxs cement on top. Dug cellar and pit, rigg stretch. Cut casing loose (2400', pulled up Hours 10-13-15 Copeland Cementers pumped 10 sxs. gel and gel @600', pulled up to 40', circulated 20 sx Complete. Tore down and moved off. No KCC Plugger On Location Sales Tax	ed up floor, had 20" of to 600', shut down. 10 d 100 sxs. 60/40 pos 4%	35(15	5.00 2,730.00T 350.00T 30.00T 30.00T 5.00 30.00T
			Total	\$3,366,58



TREATMENT REPORT

Aciu	& Cemen	l and						Acid Stage No	·	
					Type Treatment:	Amt.	Type Fluid	Sand Size	Poun	ds of Sand
Date 10/13/2015 District F.O. No. 43187			Bkdown							
	LD DRILLING					Bbl./Gal.				
	e & No. TRINKL									
Location			Field			Bbl./Gal.				
County PRATT State KS			Flush	Bbl./Gal.						
					Treated from	f		4	No. ft.	0
Casing:	Size	Type & Wr		Set atft.		f			No. ft.	0
Formation				to					No. ft.	0
							t. to	······································	NO. TC	
Formation					Actual Volume of O	I / Water to Load Hole	e			Bbl./Gal.
Formation			Perf.							
				Bottom atft.			320 Sp.		Twin _	
					Auxiliary Equipment	-	3	327		
Tubing:					Personnel MIKE A	AND SCOTT				-
	Perforated f	rom	ft. to	ft.	Auxiliary Tools _					
					Plugging or Sealing I	Materials: Type				
Open Hole	Size	T.D.	ft. P	.8. toft.	-			Gals.		lb.
		and the second sec								
Company	Representative		KELSC)	Treater		BRANDO	DN .		
TIME	PRES	SURES		·						
a.m./p.m.	Tubing	Casing	Total Fluid Pumped			REMARKS				
9:00				ON LOCATION						
		1								
				MIX 10 SKS GEL A		60/10 1% C				
				WIN TO SKS OLL ?	AND 100 SKS	500/40 4/8 3				
								10 00/10	4.0.4	
				CIRCULATE CEME	INT TO SURI	ACE FROIVI 4	0' W/ 20 SI	KS 60/40	4%	N
				THANKS						
				BRANDON						
								_		
									_	