



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

KANSAS CORPORATION COMMISSION 1274555
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

To: STATE CORPORATION COMMISSION
CONSERVATION DIVISION - PLUGGING SECTION
200 COLORADO DERBY BUILDING
WICHITA, KANSAS 67202

API NUMBER 15- WA
NE, SEC. 3, T. 14 S, R. 50 W. (E)

PLUGGED

5709 feet from S section line
136 feet from E section line

TECHNICIAN'S PLUGGING REPORT

Operator License # 5150

Lease Name Hodges "A" Well # 3

Operator: Colt Energy Inc.

County Nowata

Address 304 N. Jefferson

Well Total Depth 829 feet

IOIA, KS 66749

Conductor Pipe: Size _____ feet

Surface Casing: Size 6 1/4 feet 40

Abandoned Oil Well _____ Gas Well _____ Input Well _____ SWD Well _____ D&A _____

Other well as hereinafter indicated _____

Plugging Contractor Colt Energy Inc. License Number 5150

Address 304 N. Jefferson IOIA, KS 66749

Company to plug at: Hour: _____ Day: _____ Month: _____ Year: 19 _____

Plugging proposal received from Butch Norman

(company name) Colt Energy Inc. (phone) 316-365-3111

Work: Squeeze AIT # 2 7/8 from TD to Surface

Plugging Proposal Received by Leon Winters
(TECHNICIAN)

Plugging Operations attended by Agent?: All _____ Part _____ None _____

Operations Completed: Hour: _____ Day: 23 Month: 5 Year: 19 96

ACTUAL PLUGGING REPORT AIT # 2 7/8. Squeezed 25 SX from TD to Surface. Shut in @ 500 PSI

Remarks: _____
(If additional description is necessary, use BACK of this form.)

(did) / (did not) observe this plugging.

Signed Leon Winters
(TECHNICIAN)

STATE OF KANSAS
STATE CORPORATION COMMISSION
200 Colorado Derby Building
Wichita, Kansas 67202

WELL PLUGGING RECORD
K.A.R.-82-3-117 **PLUGGED**

15,045 20555

API NUMBER N/A
LEASE NAME HODGES "A"
WELL NUMBER 3
5109 Ft. from S Section Line
165 ~~136~~ Ft. from E Section Line
SEC. 3 TWP. 14 REG. 20(E)
COUNTY DOUGLAS
Date Well Completed APPX 5-8-84
Plugging Commenced 5-23-96
Plugging Completed 5-23-96
SPUD DATE UNKNOWN

TYPE OR PRINT
NOTICE: Fill out completely
and return to Cons. Div.
office within 30 days.

LEASE OPERATOR COLT ENERGY, INC.
ADDRESS PO BOX 388 IOLA, KANSAS 66749
PHONE (316) 365-3111 OPERATORS LICENSE NO. 5150
Character of well OIL
(Oil, Gas, D&A, SWD, Input, Water Supply Well)
The plugging proposal was approved on 5-23-96 (date)

by LEON WINTERS (KCC District Agent's Name).

Is ACO-1 filed? OLD WELL If not, is well log attached? _____

Producing Formation SQUIRREL Depth to Top 752 Bottom 778 T.D. 829

Show depth and thickness of all water, oil and gas formations.

OIL, GAS OR WATER RECORDS

CASING RECORD

Formation	Content	From	To	Size	Put In	Pulled Out
				6 1/4	40	NONE
SQUIRREL	OIL	752	778	2 7/8	829	NONE

Describe in detail the manner in which the well was plugged, indicating where the mud fluid was placed and the method or methods used in introducing it into the hole. If cement or other plug was used state the character of same and depth placed, from _____ feet to _____ feet each set. SQUEEZED 2 7/8" FROM 829 TO SURFACE WITH 25SX5 CEMENT SHUT IN @500PSI

Name of Plugging Contractor COMPANY TOOLS License No. _____

Address SAME AS ABOVE

NAME OF PARTY RESPONSIBLE FOR PLUGGING FEES: COLT ENERGY, INC.

STATE OF KANSAS COUNTY OF ALLEN, ss.

DENNIS KERSHNER AGENT OF COLT ENERGY, INC. (Employee of Operator) or (Operator) of

abovedescribed well, 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 as filed that the same are true and correct, so help me God.

(Signature) Dennis Kershner

(Address) PO BOX 388 IOLA, KS 66749

SUBSCRIBED AND SWORN TO before me this 19th day of June, 19 96

Shirley A. Stotler

Notary Public



My Commission Expires: 1-20-2000