1311435

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

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 #: 4567
Name: D. E. Exploration, Inc.
Address 1: PO BOX 128
Address 2:
City: WELLSVILLE State: KS Zip: 66092 + 0128
Contact Person: Phil Frick
Phone: (785) 883-4057

Type of Well: *(Check one)* ☐ Oil Well ☐ Gas Well ☐ OG ☐ D&A ☐ Cathodic
☐ Water Supply Well ☐ Other: ☐ SWD Permit #:
☑ ENHR Permit #: E31396.5 ☐ 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)*

Wayside	Depth to Top: 170	Bottom: 180	T.D. 279
	Depth to Top:	Bottom:	T.D.
	Depth to Top:	Bottom:	T.D.

API No. 15 - 15-121-29194-00-00
Spot Description:
SW - NE - NE - NW Sec. 4 Twp. 19 S. R. 24 ☑ East ☐ West
4815 Feet from ☐ North / ☑ South Line of Section
3085 Feet from ☑ East / ☐ West Line of Section
Footages Calculated from Nearest Outside Section Corner:
☐ NE ☐ NW ☑ SE ☐ SW
County: Miami
Lease Name: Garberg Well #: AI-109
Date Well Completed:
The plugging proposal was approved on: *(Date)*
by: *(KCC **District** Agent's Name)*
Plugging Commenced: 06/10/2016
Plugging Completed: 06/10/2016

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
		Surface	7	21	0
		Production	2.875	247	0

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.

Establish injection rate into well. Mix and Pump 10sx cement and squeeze into well. Pressure to 200psi. Shut in well casing.

Plugging Contractor License #: 33961 Name: Consolidated Oil Well Services LLC
Address 1: 1322 S GRANT Address 2: PO BOX 884
City: CHANUTE State: KS Zip: 66720 + _ _ _ _
Phone: (620) 431-9210
Name of Party Responsible for Plugging Fees: D. E. Exploration, Inc.
State of Kansas County, Franklin , ss.

Phillip Frick *(Print Name)* ☑ Employee of Operator or ☐ Operator on above-described 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 is as filed, and the same are true and correct, so help me God.

Submitted Electronically