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 #: | | | | API No. 15 | 5 | | | | |
|----------------------------------|-----------------------------|-----------------------------|--|--|---------------------------------------|-----------------|------------------------|--|--|
| Name: | | | | | Spot Description: | | | | |
| Address 1: | | | | | Sec | | | | |
| Address 2: | | | | | Feet from | North / | South Line of Section | | |
| City: | | | | | 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) | | OG D&A Cathod SWD Permit #: | County: Well #: | | | | | | |
| ENHR Permit #: | | orage Permit #: | | | | | | | |
| | | Il log attached? Yes | Date Well Completed: | | | | | | |
| Producing Formation(s): List | | | | | | | District Agent's Name) | | |
| Depth to | o Top: Botto | om: T.D | | ' | | | - | | |
| | | om: T.D | | Plugging Commenced: | | | | | |
| Depth to | o Top: Botto | om:T.D | | Plugging (| Completed: | | | | |
| | | | | | | | | | |
| Show depth and thickness of | all water, oil and gas form | ations. | | | | | | | |
| Oil, Gas or Wate | r Records | | Casing | Record (Surface, Conductor & Production) | | | | | |
| Formation | Content | Casing | Size | | Setting Depth | Pulled Out | | | |
| | | | | | | | | | |
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| | | | | | | | | | |
| Describe in detail the manner | | - | | • | | | | | |
| Plugging Contractor License #: N | | | | ame: | | | | | |
| Address 1: | | | _ Addres | s 2: | | | | | |
| City: | | | | _ State: | | Zip: | + | | |
| Phone: () | | | | _ | | | | | |
| Name of Party Responsible for | or Plugging Fees: | | | | | | | | |
| State of | County, | | | , ss. | | | | | |
| | | | | Em | nlovee of Operator of | n Operator on a | ahove-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.

(Print Name)

JOB FINISH
JO'O DRAG

IF PAID IN 30 DAYS

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|----------------------------------|--------------------------|----------------|-------------------|--|---------------------|--------------|--|--|--|
| DATE/-//-/7 | SEC. | TWP. | RANGE / 7 | CALLED OUT | ON LOCATION | JOB START | | | |
| LEASE CARALLE WELL# LOCATION PUR | | | | WE AN BE | E MUSS | | | | |
| OLD OR NEW (C | IRCLE ONE) | A C | | | | | | | |
| CONTRACTOR /V | ON Com | ş [§] | , | OWNER | S | | | | |
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| CASING SIZE 🧠 | rik . | Ι | DEPTH | AMOUNT O | RDERED LA | # Halle | | | |
| TUBING SIZE | 1 | | EPTH A | AND THE STATE OF T | E STATE TO SE | | | | |
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| TOOL | | | DEPTH | | - 19 CF | 40 4 101 | | | |
| PRES. MAX | | | AINIMUM | | | | | | |
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| | ou. | | | GEL | | @ | | | |
| ERFS | | | | CHLORIDE | | @ | | | |
| DISPLACEMENT | | | | ASC | | @ | | | |
| | EQUIPME | NT | | | | @ | | | |
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| BULK TRUCK | | Spring. | | | | @ | | | |
| | DRIVER | | | | | @ | | | |
| Constitution of | JAI V LIK | | | | | @ | | | |
| | | | | HANDLING_ | | @ | | | |
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| ilobal Oil Field | Services, | LLC . | | | | A | | | |
| ou are hereby re | quested to r | ent cemer | iting equipment | and | | <u>@</u> | | | |
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| aderetand the UC | OWHOL ARCHI | OF COTTON | VIOL I HAVE FEAC | NATOR | | @ | | | |
| nderstand the "G | DORKAL I. | ekind Al | AD COMPILIC | SAI. | Company of the | | | | |
| sted on the reverse | e side. | | | | | TOTAL | | | |
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SALES TAX (If Any)

TOTAL CHARGES

23%

PRINTED NAME

SIGNATURE