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

1333475

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 #:			AF	PI No. 15			
Name:				Spot Description:			
Address 1:			'	•		Twp S. R East West	
					Feet from		
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 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.				County: Well #: Well #: Date Well Completed: (Date) by: (KCC District Agent's Name) Plugging Commenced:			
Depth to Top: Bottom: T.D				Plugging Completed:			
Depth t	to Top:	Bottom:T.D		agging Comp	neteu		
Show depth and thickness of	all water, oil and gas	formations.					
Oil, Gas or Water Records				• •	Conductor & Prod		
Formation	Content	Casing	Size	Se	tting Depth	Pulled Out	
		olugged, indicating where the n				ods used in introducing it into the hole. If	
Plugging Contractor License #:				ame:			
Address 1:				ldress 2:			
City:	Sta	State: + +					
Phone: ()							
Name of Party Responsible for	or Plugging Fees:						
State of County,				SS.			
				Employe	e of Operator or	r 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.

(Print Name)

GLOBAL OIL FIELD SERVICES, LLC

2722

IF PAID IN 30 DAYS

REMIT TO 24 S. Lincoln SERVICE POINTS Russell, KS 67665 11.1011 SEC. TWP. RANGE JOB START JOB FINISH STATE COUNTY WELL#. OLD OR NEW (CIRCLE ONE) CONTRACTOR OWNER TYPE OF JOB HOLE SIZE T.D. CEMENT CASING SIZE DEPTH AMOUNT ORDERED **TUBING SIZE** DEPTH DRILL PIPE DEPTH TOOL DEPTH PRES. MAX MINIMUM COMMON MEAS, LINE SHOE JOINT POZMIX_ @ CEMENT LEFT IN CSG. GEL___ @ PERFS CHLORIDE . @ DISPLACEMENT @ **EQUIPMENT** (a) (a) PUMP TRUCK CEMENTER (a) HELPER (a) BULK TRUCK (a) DRIVER (a) **BULK TRUCK** (a) DRIVER (a) HANDLING_ @ MILEAGE_ TOTAL REMARKS: **SERVICE** DEPTH OF JOB _ PUMP TRUCK CHARGE. EXTRA FOOTAGE..... (a) MILEAGE ... @ MANIFOLD @ @ **@** CHARGE TO: TOTAL STREET ___ STATE_ ZIP PLUG & FLOAT EQUIPMENT Global Oil Field Services, LLC @ You are hereby requested to rent cementing equipment and @ furnish cementer and helper(s) to assist owner or contractor to @ do work as is listed. The above work was done to satisfaction (a) and supervision of owner agent or contractor. I have read and @ understand the "GENERAL TERMS AND CONDITIONS" listed on the reverse side. TOTAL PRINTED NAME SALES TAX (If Any) TOTAL CHARGES SIGNATURE

DISCOUNT