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

1353387

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 Permit #: SWD Permit #: SWD Permit #: ENHR Permit #: Gas Storage Permit #: Gas Storage Permit #: No Is ACO-1 filed? Yes No If not, is well log attached? Yes No Producing Formation(s): List All (If needed attach another sheet) Yes Yes Yes Yes Yes	County: Well #: Lease Name: Well #: Date Well Completed: The plugging proposal was approved on: (Date) by: (KCC District Agent's Name)
Depth to Top: Bottom:T.D Depth to Top: Bottom:T.D Depth to Top: Bottom:T.D	Plugging Commenced:

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 Plu	ugging Fees:			
State of	County,	, SS.		
	(Print Name)	Employee of O	perator or Operator on a	bove-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.

Form	CP4 - Well Plugging Record
Operator	TDI, Inc.
Well Name	BICE 1
Doc ID	1353387

Producing Formations

Formation	Тор	Bottom	Total Depth
Lansing/Kansas City	3439	3443	
Lansing/Kansas City	3420	3422	
Lansing/Kansas City	3395	3397	
Lansing/Kansas City	3347	3350	

GLOBAL OIL FIELD SERVICES, LLC

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SALES TAX (If Any) TOTAL CHARGES

DISCOUNT.

TOTAL

IF PAID IN 30 DAYS

REMIT TO 24 S. Lincoln Russell, KS 67665					SERVICE POINT:				
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DATE 4-10-17	2	6	105	176	the second second	1. martine	COUNTY	STATE	
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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 and supervision of owner agent or contractor. I have read and understand the "GENERAL TERMS AND CONDITIONS" listed on the reverse side.

PRINTED NAME	0.	FAAA	
SIGNATURE	Broth	Fillel	+