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

1365536

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

Spot Description: Spot	OPERATOR: License #:			AP	l No. 15					
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City:	Address 1:			_		Sec Tv	vp S. R.	East We		
Contact Person: Fhone (Address 2:			_		Feet from	North /	South Line of Section		
Phone (City:	State:	Zip: +	_	Feet from East / West Line of Section					
Type of Wellt; (Check one)	Contact Person:			Foo	otages C	alculated from Neare	st Outside Sect	tion Corner:		
Water Supply Well Other: Gas Storage Permit #: Lease Name: Well #: Lease Name: Well #: Lease Name: Well #: Date Well Completed: The plugging proposal was approved on: (Date) by: (MCC District Agent's Name) Producing Formation (s): List All (if needed attach another sheet) Depth to Top: Bottom: T.D. Depth to Top: Depth to Top: Depth to Top: Depth to Top: Bottom: T.D. Depth to Top:	Phone: ()					NE NW	SE SV	V		
Water Supply Well Other:	Type of Well: (Check one)	Oil Well Gas Well	OG D&A Cathod	ic Co	ııntv.					
ENIR Permit #:	Water Supply Well	Other:	SWD Permit #:							
As ACC-1 filed?	ENHR Permit #:	Gas Sto	orage Permit #:							
Depth to Top:	Is ACO-1 filed? Yes	No If not, is wel	I log attached? Yes			•				
Depth to Top:	Producing Formation(s): List /	All (If needed attach anothe	r sheet)	by:			(K(CC District Agent's Nam		
Depth to Top: Bottom: T.D. Plugging Completed: Depth to Top: Bottom: T.D. Plugging Completed: Depth to Top: Bottom: T.D. Plugging Completed: Show depth and thickness of all water, oil and gas formations. Oil, Gas or Water Records Casing Size Setting Depth Pulled Out 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 zeroent 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: Zip: +	Depth to	o Top: Botto	om: T.D							
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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

2969

REMIT TO

24 S. Lincoln Russell, KS 67665 SERVICE POINT:

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