

Notice: Fill out COMPLETELY and return to Conservation Division at the address below within 60 days from plugging date.

KANSAS CORPORATION COMMISSION 1367714
 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 #: _____
 Name: _____
 Address 1: _____
 Address 2: _____
 City: _____ State: _____ Zip: _____ + _____
 Contact Person: _____
 Phone: (_____) _____
 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. _____
 _____ Depth to Top: _____ Bottom: _____ T.D. _____
 _____ Depth to Top: _____ Bottom: _____ T.D. _____

API No. 15 - _____
 Spot Description: _____
 _____ - _____ - _____ - _____ Sec. _____ Twp. _____ S. R. _____ East West
 _____ Feet from North / South Line of Section
 _____ Feet from East / West Line of Section
 Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
 County: _____
 Lease Name: _____ Well #: _____
 Date Well Completed: _____
 The plugging proposal was approved on: _____ (Date)
 by: _____ (KCC District Agent's Name)
 Plugging Commenced: _____
 Plugging Completed: _____

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 Plugging Fees: _____
 State of _____ County, _____, ss.
 _____ Employee of Operator or Operator on above-described well,
 (Print Name)

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

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KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION
WELL PLUGGING RECORD
K.A.R. 82-3-117

Form CP-4
July 2014
Type or Print on this Form
Form must be Signed
All blanks must be Filled

OPERATOR: License #: 4706
Name: Messenger Petroleum, Inc.
Address 1: 525 S Main ST.
Address 2: _____
City: Kingman State: Ks Zip: 67068 + 1968
Contact Person: Jon Messenger
Phone: (620) 532-5400
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. _____
_____ Depth to Top: _____ Bottom: _____ T.D. _____
_____ Depth to Top: _____ Bottom: _____ T.D. _____

API No. 15 - 15-095-21737-00-00
Spot Description: NA
____ - ____ - NW SW Sec. 14 Twp. 30 S. R. 7 East West
1,980 Feet from North / South Line of Section
4,620 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Kingman
Lease Name: Dunkelberger B Well #: 2
Date Well Completed: NA
The plugging proposal was approved on: NA (Date)
by: Jeff Klock (KCC District Agent's Name)
Plugging Commenced: 7/20/2017
Plugging Completed: 7/31/2017

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	8 5/8"	259'	180 Sacks Cement
		Production	4 1/2"	4228'	100 Sacks Cement

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.

Drove to location, raised pole, unpacked tubing head, set bridge plug at 4040', capped with 25 sacks cement, dug cellar and pit, unpacked casing head, set floor, cut surface off 4' below ground, loaded hole with water, ripped casing at 3045', casing cutter hung up and parted sandline, ran spear to 2850', got hold of cable, pulled on knife, pulled tubing out, had 80' of cable, ran tubing back in to 2500', No charge/ Drove to location, ran tubing to 2900', got ahold of cable, pulled out tubing, only had 5' of cable, rigged floor back up, tried to work casing free, left on tension, drove home. Drove to location, shot off at 2790', pulled casing to 1300', pumped 20 sacks gel, pulled casing to 1150', pumped 35 sacks cement, pulled casing to 720', swedged in, drove home. No charge/drove to location, ran baylor in and tagged cement at 575', pressured casing to 2000 psi, no gain, pulled one joint, pressured casing to 2000 psi, no gain, pulled casing out, ran baylor tagged cement at 850', ran tubing to 725', pumped 35 sacks cement, pulled to 300', pumped 140 sacks cement to surface, tore down floor and rig.

Plugging Contractor License #: 31925 Name: Quality Well Service, Inc.
Address 1: 190 US HWY 56 Address 2: _____
City: Ellinwood State: Ks Zip: 67526 + _____
Phone: (620) 727-3409
Name of Party Responsible for Plugging Fees: Messenger Petroleum, Inc.

State of _____ County, _____, ss.

(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.

Signature: _____

QUALITY WELL SERVICE, INC.

Federal Tax I.D. # 481187368

6692

Home Office 324 Simpson St., Pratt, KS 67124

Office 620-727-3410
Fax 620-672-3663

Rich's Cell 620-727-3409
Brady's Cell 620-727-6964

Date	7-27-17	Sec.	14	Twp.	30	Range	7	County	Kingman	State	KS	On Location	Finish
Lease	D. Kellenger		Well No.		K 2		Location						
Contractor	Quality Well Service						Owner						
Type Job	PTH						To Quality Well Service, Inc. You are hereby requested to rent cementing equipment and furnish cementer and helper to assist owner or contractor to do work as listed.						
Hole Size							T.D.						
Csg.	4 5/8						Depth						
Tbg. Size							Depth						
Tool							Charge To						
Cement Left in Csg.							Street						
Meas Line							City						
							State						
							The above was done to satisfaction and supervision of owner agent or contractor.						
							Cement Amount Ordered						
EQUIPMENT													
Pumptrk	No.							Common	210				
Bulktrk	No.							Poz. Mix					
Bulktrk	No.							Gel.	20				
Pickup	No.							Calcium	2				
JOB SERVICES & REMARKS													
Rat Hole							Hulls						
Mouse Hole							Salt						
Centralizers							Flowseal						
Baskets							Kol-Seal						
D/V or Port Collar	7-27-17						Mud CLR 48						
	1st Pumped 2000 gal @ 1300'						CFL-117 or CD110 CAF 38						
							Sand						
							Handling						
	2nd Pumped 3500 gal @ 3900'						Mileage						
	@ 1150' tagged plug @ 57'						FLOAT EQUIPMENT						
	1 1/2" 4-5 csg.						Guide Shoe						
	7-31-17						Centralizer						
	1st Pulled csg out tagged cement						Baskets						
	2nd 850' Run tubing to 725'						AFU Inserts						
	Pumped 3500 gal cement						Float Shoe						
							Latch Down						
	2nd Pumped 1400 gal cement						LMV 50						
	@ 300' to surface						Service supervisor						
							Pumptrk Charge						
							Mileage						
							Tax						
							Discount						
							Total Charge						
X Signature													