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

1373355

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 | 5 | | | | |
|-------------------------------------|------------------------------|----------------------------|------------|--|---------------------------------------|---------------|----------------------|--|--|
| Name: | | | | | ription: | | | | |
| Address 1: | | | | | Sec 7 | wp S. R | East West | | |
| Address 2: | | | | | Feet from | North / S | outh 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) | Oil Well Gas Well | OG D&A Catho | dic | County: | | | | | |
| Water Supply Well | Other: | SWD Permit #: | | County: Well #: Date Well Completed: (Date) The plugging proposal was approved on: (Date) | | | | | |
| ENHR Permit #: | Gas Sto | orage Permit #: | | | | | | | |
| s ACO-1 filed? Yes | No If not, is we | Il log attached? Yes | No | | | | | | |
| Producing Formation(s): List | All (If needed attach anothe | r sheet) | | | | | | | |
| Depth to | o Top: Botto | om: T.D | | | | | | | |
| Depth to | o Top: Botto | om: T.D | | | Commenced: Completed: | | | | |
| Depth t | o Top: Botto | om:T.D | | Flugging | Completed | | | | |
| | | | | | | | | | |
| Show depth and thickness of | all water, oil and gas form | ations. | | | | | | | |
| Oil, Gas or Wate | r Records | | Casing | ng Record (Surface, Conductor & Production) | | | | | |
| Formation | Content | Casing | Size | | Setting Depth | Pulled Out | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
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| | | | | | | | | | |
| cement or other plugs were u | sed, state the character of | same depth placed from (bo | ottom), to | (top) for eacr | n plug set. | | | | |
| Plugging Contractor License #: Name | | | | | | | | | |
| Address 1: | | | | | | | | | |
| City: | | | | _ State: | | Zip: | + | | |
| Phone: () | | | | _ | | | | | |
| Name of Party Responsible for | or Plugging Fees: | | | | | | | | |
| State of | County, | | | , ss. | | | | | |
| | | | | | plovee of Operator or | Operator on a | hove-described wall | | |

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)



PRESSURE PUMPING LLC
PO Box 884, Chanute, KS 66720
620-431-9210 or 800-467-8676

TICKET NUMBER 53395 LOCATION OHOUR KS FOREMAN Casey Kennedy

FIELD TICKET & TREATMENT REPORT

| DATE CUSTOMER WILL NAME & NUMBER SECTION TOWNSHIP RANGE COUNTY (1/13/17 1838 Verma Dumn # 1 SE 28 15 20 FR WILL 13/17 1838 Verma Dumn # 1 SE 28 15 20 FR WILL 15/17 1828 Verma Dumn # 1 SE 28 15 20 FR WILL 15/17 1828 Verma Dumn # 1 SE 28 15 20 FR WILL 16/17 1828 Verma Dumn # 1 SE 28 15 20 FR WILL 16/17 1828 Verma Dumn # 1 SE 28 15 20 FR WILL 16/17 1828 Verma Dumn # 1 SE 28 15 20 FR WILL 16/17 1828 Verma Dumn # 1 SE 28 15 20 FR WILL 16/17 1828 Verma Dumn # 1 SE 28 15 20 FR WILL 16/17 1828 Verma Dumn # 1 SE 28 15 1828 Verma Dumn # 1 SE 28 18 | | | OLI: | ALETA I | | | |
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| | THORIZTION | K R | TITLE_ | | | DATE | 1036.06 |

I acknowledge that the payment terms, unless specifically amended in writing on the front of the form or in the customer's account records, at our office, and conditions of service on the back of this form are in effect for services identified on this form