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

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 #: 32595
Name: MSG Resources Inc.
Address 1: 971 1400TH ST
Address 2:
City: IOLA State: KS Zip: 66749 + 3942
Contact Person: mike brown
Phone: (620) 365-0638

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 - 15-133-02330-00-00
Spot Description:
- W2 W2 NW Sec. 34 Twp. 27 S. R. 19 ☑ East ☐ West
3960 Feet from ☐ North / ☑ South Line of Section
4950 Feet from ☑ East / ☐ West Line of Section
Footages Calculated from Nearest Outside Section Corner:
☐ NE ☐ NW ☑ SE ☐ SW
County: Neosho
Lease Name: JOHNSON Well #: 2 3
Date Well Completed:
The plugging proposal was approved on: 6/5/2018 *(Date)*
by: Alan Dunning *(KCC **District** Agent's Name)*
Plugging Commenced: 6/8/2018
Plugging Completed: 6/8/2018

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.

pumped well full of cement, shut in @ 600 lbs, used 45 sacks of Portland.

Plugging Contractor License #: 33749 Name: Kepley Well Service, LLC
Address 1: 19245 FORD RD Address 2:
City: CHANUTE State: KS Zip: 66720 + 5498
Phone: (620) 433-7196
Name of Party Responsible for Plugging Fees: Mike Brown
State of Kansas County, Allen , ss.
Mike Brown *(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.

Submitted Electronically