KOLAR Document ID: 1440688

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 #: | | | | API No. 15 | | | |
|---|------------------------------|---------|-----------|---|-------------------------|---|--|
| Name: | | | | Spot Description: | | | |
| Address 1: | | | | Sec Twp S. R East West | | | |
| Address 2: | | | | Feet from North / South Line of Section Feet from East / West Line of Section | | | |
| City: | | | | | | | |
| 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 #: | | | | County: Well #: | | | |
| ENHR Permit #: | | | | Date Well Completed: | | | |
| Is ACO-1 filed? Yes No If not, is well log attached? Yes No | | | | The plugging proposal was approved on: (Date) | | | |
| Producing Formation(s): List All (If needed attach another sheet) | | | | by: (KCC District Agent's Name) Plugging Commenced: | | | |
| Depth to Top: Bottom: T.D | | | | | | | |
| Depth to Top: Bottom: T.D | | | | Plugging Completed: | | | |
| Depth to Top: Bottom: T.D | | | | | g completed. | | |
| | | | | | | | |
| Show depth and thickness of a | all water, oil and gas forma | ations. | | | | | |
| Oil, Gas or Water Records | | | Casing Re | Casing Record (Surface, Conductor & Production) | | | |
| Formation | Content | Casing | Size | | Setting Depth | Pulled Out | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| Describe in detail the manner cement or other plugs were us | | _ | | | | Is used in introducing it into the hole. If | |
| Plugging Contractor License #: | | | | e: | | | |
| Address 1: Address | | | | : | | | |
| City: | | | \$ | State: | | Zip:+ | |
| Phone: () | | | | | | | |
| Name of Party Responsible for | r Plugging Fees: | | | | | | |
| State of | County, _ | | | , ss. | | | |
| | <i>3</i> , – | | | _ | implayed of Onerster - | Operator on obeyed decertibed | |
| (Print Name) | | | | E | imployee 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.

QUALITY OILWELL CEMENTING, INC.

1182

Federal Tax I.D.# 20-2886107 Home Office P.O. Box 32 Russell, KS 67665

Phone 785-483-2025

Cell 785-324-1041 Sec. Twp. Range County State On Location Finish 1-24-45 HW Well No. 1 - 35 To Quality Oilwell Cementing, Inc. 11211 Contractor You are hereby requested to rent cementing equipment and furnish cementer and helper to assist owner or contractor to do work as listed. Type Job Charge < Hole Size T.D. 7827 WG Csq. Depth Street Depth Tbg. Size City State Tool Depth The above was done to satisfaction and supervision of owner agent or contractor. Cement Amount Ordered \ Cement Left in Csg. Shoe Joint Meas Line Displace **EQUIPMENT** Common Cementer ' Poz. Mix Pumptrk Helper Driver Driver No. Bulktrk Gel. / No. Driver Bulktrk Calcium Driver **JOB SERVICES & REMARKS** Hulls Remarks: Salt Rat Hole Flowseal Mouse Hole 400 Kol-Seal Centralizers Mud CLR 48 Baskets CFL-117 or CD110 CAF 38 w/255x D/V or Port Collar Sand Handling , Mileage 1001 FLOAT EQUIPMENT Guide Shoe Centralizer Baskets AFU Inserts Float Shoe Latch Down Pumptrk Charge Mileage 7 Tax Discount Signature Total Charge