KOLAR Document ID: 1775725

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 |
| City: State: Zip: + | 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 Cathodic Water Supply Well Other: SWD Permit #: SWD Permit #: | County: Well #: Lease Name: Well #: 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) |
| Depth to Top: Bottom: T.D | Plugging Commenced: |
| Depth to Top: Bottom: T.D | Plugging Completed: |
| Depth to Top: Bottom:T.D | |

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 | | | | |
| | | | | | | | | | |
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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: | Name: | | | | | | | |
|--|-------------------------|-------------------------------------|--|--|--|--|--|--|--|
| Address 1: | Address 2: | | | | | | | | |
| City: | State: | Zip: + | | | | | | | |
| Phone: () | | | | | | | | | |
| Name of Party Responsible for Plugging Fees: | | | | | | | | | |
| State of County, | , SS. | | | | | | | | |
| (Print Name) | Employee of Operator or | r 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

| Form | CP4 - Well Plugging Record | | | | | | |
|-----------|----------------------------|--|--|--|--|--|--|
| Operator | Trek AEC, LLC | | | | | | |
| Well Name | HINDMAN 2 | | | | | | |
| Doc ID | 1775725 | | | | | | |

Producing Formations

| Formation | Тор | Bottom | Total Depth |
|-----------|------|--------|-------------|
| Arbuckle | 3260 | 3263 | 3532 |
| Arbuckle | 3316 | 3319 | 3532 |
| Arbuckle | 3427 | 3431 | 3532 |
| Arbuckle | 3528 | 3531 | 3532 |



BILL TO

Trek AEC, LLC 1020 E. Levee St Ste 130 Dallas, TX 75207-4032

- Acidizing
- Cement
- Tool Rental

| TERMS | Well N | o. Lease | County | Contractor | We | ll Type | W | ell Category | Job Purpose | Operator |
|--|--------|--|-------------|------------|----|---------|-----------------------------|------------------------------------|---|---|
| Net 30 | #2 | Hindman | Rooks | | | Oil | | Workover | РТА | David |
| PRICE | REF. | | DESCRIPT | ION | | QT | ſ | UM | UNIT PRICE | AMOUNT |
| 575W 576W-P 290 328-4 581W 583W | | Mileage - 1 Way Pump Charge - PTA D-Air 60/40 Pozmix (4% C Service Charge Cem Drayage Subtotal Sales Tax Rooks Co | Gel) ent | | | | 75 1 80 150 454 | Job Gallon(s) Sacks Sacks | 8.00 1,250.00 45.00 14.00 2.00 1.00 7.00% | 600.00T 1,250.00T 45.00T 1,120.00T 300.00T 454.00T 3,769.00 263.83 |
| We A | ppre | ciate Your | Busines | | | | Tota | | \$4,032.83 | |

| | SWIFT OPERATOR | DATE SIGNED | MUST BE SIGNED BY CUSTOMER OR CUSTOMER'S AGENT PRIOR TO START OF WORK OR DELIVERY OF GOODS. | LIMITED WARRANTY provisions. | LEGAL TERMS: Customer hereby acknowledges and agrees to the terms and conditions on the reverse side hereof which include, | | | | 283 | 185 | 1-828 | 290 | 5760 | 575 | PRICE SECONDA REFERENCE PAR | REFERRAL LOCATION | 4. | 2. April (14) | SERVICE LOCATIONS | Services, Inc | SWIFT |
|------------|---|-------------------------------------|--|---|--|--|--|----|------------|---------------|----------------|---------|-----------------|---------|---|----------------------|-----------------|---------------|-------------------|-----------------------|--------------|
| | OMER ACCEPTANCE OF | TIME SIGNED | ODS. | ions. | rereby acknowledges and a reverse side hereof which | | | | 2 | 2 | 2 | | / | | SECONDARY REFERENCE/ ACC PART NUMBER LOC | INVOICE INSTRUCTIONS | WELLIPPE | | N SE | | ~ 1 |
| | MATERIALS AND SERV | - A.M. | NES | | | | | | 2 | 2 | 7 | | Kin | MILEAGE | ACCOUNTING LOC ACCT DF | NS | MELL CATEGORY | - | LEASE | CITY, STATE, ZIP CODE | CHARGE TO: |
| | CUSTOMER ACCEPTANCE OF MATERIALS AND SERVICES The customer hereby acknowled | 785-798-2300 | P.O. BOX 466 NESS CITY, KS 67560 | SWIFT SERVICES, INC. | REMIT PAYMENT TO: | | | // | 2 ALLIG OF | Ervice Charae | Sha beauty the | -stic ' | w Observe - Pro | TRK 111 | DESCRIPTION | | JUB PURPUSE | RIG NAME/NO. | COUNTY/PARISH | | K Lesources |
| | wledges receipt of th | ARE YOU SATISFIED WITH OUR SERVICE? | WE OPERATED THE EQUIPMENT AND PERFORMED JOB GALCULATIONS SATISFACTORILY? | WE UNDERSTOOD AND MET YOUR NEEDS? OUR SERVICE WAS PERFORMED WITHOUT DELAY? | SURVEY OUR EQUIPMENT PERFORMED WITHOUT BREAKDOWN? | | | | 2 | Cont 15 | get 8 | | | K | | | WE | VIA DE | STATE CITY | | |
| | ges receipt of the materials and services listed on this ticket. | CUSTOMER DID NOT WISH TO RESPOND | NT | 47 | AGREE UNDECIDED | | | _ | 1/11/1 | X5 C | SX (| 1 box | A3 1 | S Mi | ATY. U/M ATY. U/M | | WELL PERMIT NO. | DELIVERED TO | Y | MIMM | Hetaech5-101 |
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| JOB LC |)G | | | | | SWIF | T Seri | ices. Inc. | 30-24 PAGE NO. | | | | | |
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