

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

RECEIVED

FEB 21 2006

Form CP-4
December 2003
Type or Print on this Form
Form must be Signed
All blanks must be Filled

KCC WICHITA

Lease Operator: A A PRODUCTION

Address: PO BOX 100 HILL CITY KS 67642

Phone: (785) 421-6266 Operator License #: 33076

Type of Well: SWD Docket #: D16,217
(Oil, Gas D&A, SWD, ENHR, Water Supply Well, Cathodic, Other) (If SWD or ENHR)

The plugging proposal was approved on: 02-13-06 (Date)

by: KCC HAYS OFFICE PER STATE REGULATIONS (KCC District Agent's Name)

Is ACQ-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 Number: 15-D65-20473-00-00

Lease Name: BIEKER

Well Number: #1-SWD

Spot Location (QQQ): SW - SW - SE

306 Feet from North / South Section Line

2475 Feet from East / West Section Line

Sec. 30 Twp. 9 S. R. 24 East West

County: GRAHAM

Date Well Completed: _____

Plugging Commenced: 02-16-06

Plugging Completed: 02-16-06

Show depth and thickness of all water, oil and gas formations.

Oil, Gas or Water Records		Casing Record (Surface Conductor & Production)				
Formation	Content	From	To	Size	Put In	Pulled Out
				2 1/2	1875	0

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.

DUG DOWN TO SURFACE PIPE; PUMPED DOWN PIPE 50 SACKS 60/40 POZ WITH 10% GEL; PRESSURE TO 600 POUNDS SHUT IN

Name of Plugging Contractor: ALLIED CEMENTING COMPANY, INC License #: _____

Address: PO BOX 31 RUSSELL KS 67665-0031

Name of Party Responsible for Plugging Fees: A & A PRODUCTION

State of KANSAS County, GRAHAM, ss.

ANDY ANDERSON (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) Andy Anderson

(Address) PO BOX 100 HILL CITY KS 67642

FEB 17 2006

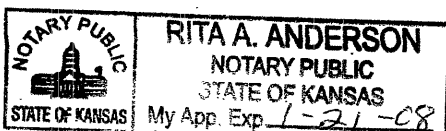
SUBSCRIBED and SWORN TO before me this 16TH day of FEBRUARY

Rita A. Anderson
Notary Public

My Commission Expires: January 21, 2008

HAYS, KS 2006

Mail to: KCC - Conservation Division, 130 S. Market - Room 2078, Wichita, Kansas 67202



Bun

ALLIED CEMENTING CO., INC. 20040

Federal Tax I.D.# ~~000000000~~

REMIT TO P.O. BOX 31
RUSSELL, KANSAS 67665

SERVICE POINT: Russell

DATE <u>2-16-06</u>	SEC. <u>30</u>	TWP. <u>9</u>	RANGE <u>24</u>	CALLED OUT <u>9:00 AM</u>	ON LOCATION <u>10:00</u>	JOB START	JOB FINISH <u>11:30 AM</u>
LEASE <u>Wafeyan N to Redline</u>		WELL # <u>SWD</u>		LOCATION <u>Wafeyan N to Redline</u>		COUNTY <u>Wago</u>	STATE
OLD OR NEW (Circle one)							

CONTRACTOR _____

TYPE OF JOB Plug

HOLE SIZE _____ **T.D.** _____

CASING SIZE _____ **DEPTH** _____

TUBING SIZE _____ **DEPTH** _____

DRILL PIPE _____ **DEPTH** _____

TOOL _____ **DEPTH** _____

PRES. MAX _____ **MINIMUM** _____

MEAS. LINE _____ **SHOE JOINT** _____

CEMENT LEFT IN CSG. _____

PERFS. _____

DISPLACEMENT _____

EQUIPMENT

PUMP TRUCK CEMENTER Bill

407 **HELPER** Steve

BULK TRUCK _____

_____ **DRIVER** _____

BULK TRUCK _____

_____ **DRIVER** _____

REMARKS:

Pump down 2 1/2 w 50 lb cement

press to 600 # 1 1/2 in

CHARGE TO: A-A Production

STREET _____

CITY _____ **STATE** _____ **ZIP** _____

OWNER _____

CEMENT

AMOUNT ORDERED 100 BA 6 1/4 - 10

used 50 BA

COMMON _____ @ _____

POZMIX _____ @ _____

GEL _____ @ _____

CHLORIDE _____ @ _____

ASC _____ @ _____

RECEIVED

FEB 21 2006

KCC WICHITA

HANDLING _____ @ _____

MILEAGE _____ @ _____

TOTAL _____

SERVICE

DEPTH OF JOB _____

PUMP TRUCK CHARGE _____

EXTRA FOOTAGE _____ @ _____

MILEAGE _____ @ _____

MANIFOLD _____ @ _____

TOTAL _____

PLUG & FLOAT EQUIPMENT

_____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

TOTAL _____

To Allied Cementing Co., Inc.
You are hereby requested to rent cementing equipment and furnish cementer and helper to assist owner or contractor to do work as is listed. The above work was done to satisfaction and supervision of owner agent or contractor. I have read & understand the "TERMS AND CONDITIONS" listed on the reverse side.

TAX _____

TOTAL CHARGE _____

DISCOUNT _____ **IF PAID IN 30 DAYS**

SIGNATURE Andy Anderson **PRINTED NAME** _____