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

Lease Operator: Petrol Oil and Gas, Inc.				API Number: 15 - 031-20446-00-00 CP2 2-B Well Number: 2-B SW4 NW4	
Address: 11020 King St. Suite 375				Lease Name: Todd & DON CP2 3 (1)	
Phone: (913) 549 -8442 Operator License #: 33247				Well Number: 2-B	
Type of Well: D-17,880 (Oil, Gas D&A, SWD, ENHR, Water Supply Well, Cathodic, Other) (If SWD or ENHR)				Spot Location (QQQQ): SW4 - NW4 280 292 Feet from North / South Section Line	
The plugging proposal was approved on: Septemb		(#00	(Date)	330 U 29D	North / ✓ South Section Line ✓ East / ☐ West Section Line
by: Steve Bond (KCC District Agent's Name)					
Is ACO-1 filed? Yes No If not, is well log attached? Yes No				Sec. 2 Twp. 22 S. R. 13 V East West County: County: 4/8/75 Date Well Completed:	
Producing Formation(s): List All (If needed attach another sheet)					
Arbuckle Depth to Top: 2310 Bottom: 2375 T.D. 2405'				Plugging Commenced:	
Depth to Top: Bottom: T.D				Plugging Completed: 9/12/2007	
Depth to Top:	Bottoi	m:	T.D	Plugging Completed	d:
Show depth and thickness of all water, oil and gas	formations.				•
Oil, Gas or Water Records			Casing Record (Surface Conductor & Pro	oduction)
Formation Content	From	То	Size	Put In	Pulled Out
	1				
Describe in detail the manner in which the well is please. If cement or other plugs were used, state the see attached sheet BIRK Brian L. 7	character of	f same depth	placed from (bott	iom), to (top) for each	CC 10/12/07 PFF PON CPZ/3
Name of Plugging Contractor: Hurricane Services	, Inc.			License #: 16	5290 31280
Address: 3613A Y Road Madison, Kansas	66860				
Name of Party Responsible for Plugging Fees: Pe	trol Oil and	d Gas, Inc			
State of Kansas . County,	Coffey		, ss.		
Patrick Everett			(Employee e	f Operator) or (Operator	or) on above-described well, being first duly
sworn on oath, says: That I have knowledge of the same are true and correct, so help me God.	facts statements	ents, and mat			•
OCT 10 2007	(Address) <u> </u>	010 Ni	OAK ST.	OTTAWA	KANSAS 66067
SUBSCRIBED and S	WORN TO E	efore me this	8th day of	October	20 07
Conduction Streeting AMMED	2		M	y Commission Expires:	2-6-10
NOTARY PUBLIC - State of Kansas SANDRA D. PYLE My Appt. Exp. 2010	Notary R		,	om 2078, Wichita, Ka	

RA