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

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

WELL PLUGGING RECORD All blanks must be Filled K.A.R. 82-3-117 Lease Operator: Eagle Creek Corporation API Number: 15-119-21027-00-00 Address: 150 N Main Ste 905 Wichita KS 67202 Lease Name: Feldman Well Number: 2-18 Phone: (316) 264 8044 Operator License #: 30129 Spot Location (QQQQ): \_\_\_ 2310 Feet from North / South Section Line (If SWD or ENHR) (Oil, Gas D&A, SWD, ENHR, Water Supply Well, Cathodic, Other) The plugging proposal was approved on: \_ 660 Feet from East / West Section Line by: Ken Jehlik Sec. 18 Twp. 34 S. R. 28 East West \_ (KCC District Agent's Name) County: Meade Is ACO-1 filed? Yes No If not, is well log attached? Date Well Completed: 10 -31-00 Producing Formation(s): List All (If needed attach another sheet) Plugging Commenced: 4-15-08 Depth to Top: \_ Plugging Completed: 4-16-08 Bottom: Depth to Top: Bottom: \_ Show depth and thickness of all water, oil and gas formations. Casing Record (Surface Conductor & Production) Oil, Gas or Water Records **Pulled Out** To Siza Put In Formation Content 40 40 20 JOIL 0 8% 40 1590 1590 600 B 6008 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. 16. hulls t 20 sx cmt. plug @ perfs from 5856 to 5656, to 1620. Circ. hole winud & mixed Capped 8% 3ft Name of Plugging Contractor SARGENTANDHORTON PLUGGING, INC. License #: 3/15/ EAGLE CREEK

Name of Plugging Contractor SARGENT AND HORTON PILGGING, TNC. License #: 3//5/
Address: Rt. I, Box 49 BA Tyrone, OK 73951-973/
Name of Party Responsible for Plugging Fees: EAGLE CLEEK CONSOLATION
State of KANSAS County, FOGUICK, ss.

(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)

(Address)

(Address)

(Signature)

(Address)

(Address

MAY 2 0 2008