| <b>Notice:</b> Fill out COMPLETE<br>and return to Conservation L<br>at the address below within<br>60 days from plugging date.        |                                       | OIL & G                                                 | CORPORA<br>Sas Conse<br><b>- PLUGG</b><br>K.a.r. 8 | RVATION DI                     | VISION                                                                                                       | <i>v</i>                    | Form CP-4<br>December 2003<br>Ype or Print on this Form<br>Form must be Signed<br>All blanks must be Filled |  |
|---------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------|---------------------------------------------------------|----------------------------------------------------|--------------------------------|--------------------------------------------------------------------------------------------------------------|-----------------------------|-------------------------------------------------------------------------------------------------------------|--|
| Lease Operator:                                                                                                                       | bderhalden                            |                                                         |                                                    |                                | API Number:                                                                                                  | <u>15 - 205 - 1</u>         | 9659-00-00                                                                                                  |  |
| Address: 100 S. Main, Suite 510, Wichita, Kansas 67202                                                                                |                                       |                                                         |                                                    |                                | Lease Name: Volunteer                                                                                        |                             |                                                                                                             |  |
| Phone: ( 316 262-3411 Operator License #: 5394                                                                                        |                                       |                                                         |                                                    |                                | Well Number:         14           Spot Location (QQQQ):         NE         -         NW         -         NW |                             |                                                                                                             |  |
| Type of Well: <u>Oil</u><br>(Oil, Gas D&A, SWD, ENHR, Water Supply Well, Cathodic, Other) Docket #: <u>E=8283</u><br>(If SWD or ENHR) |                                       |                                                         |                                                    |                                |                                                                                                              |                             |                                                                                                             |  |
|                                                                                                                                       |                                       |                                                         |                                                    |                                | 165_Feet from X North / South Section Line                                                                   |                             |                                                                                                             |  |
| The plugging proposal was approved on: <u>10-08-08</u> (Date)                                                                         |                                       |                                                         |                                                    |                                | East / X West Section Line                                                                                   |                             |                                                                                                             |  |
| by:Allen Dunning (KCC District Agent's Name) Sec 27 Twp. 29 S. R. 15 East                                                             |                                       |                                                         |                                                    |                                |                                                                                                              |                             | ▲ East                                                                                                      |  |
| Is ACO-1 filed? Yes XNo If not, is well log attached? Yes XNo Court                                                                   |                                       |                                                         |                                                    |                                |                                                                                                              | County:Wilson               |                                                                                                             |  |
| Producing Formation(s): List All (If needed attach another sheet) Date Well Completed:                                                |                                       |                                                         |                                                    |                                |                                                                                                              | ieted: NA                   |                                                                                                             |  |
| Bartlesville Depth to Top: <u>1110</u> Bottom: <u>1171</u> T.D. <u>1171</u> Plugging Commenced: <u>10-08</u>                          |                                       |                                                         |                                                    |                                |                                                                                                              | 8-08                        |                                                                                                             |  |
| Depth to Top: Bottom: T.D                                                                                                             |                                       |                                                         |                                                    |                                | Plugging Completed: 10-20-08                                                                                 |                             |                                                                                                             |  |
|                                                                                                                                       | Depth to Top:                         | Bottom                                                  | : T.I                                              | D                              |                                                                                                              | eteu                        |                                                                                                             |  |
| Show depth and thickness of                                                                                                           | all water, oil and gas f              | ormations.                                              |                                                    | *                              |                                                                                                              | а.                          | 0                                                                                                           |  |
| Oil, Gas or Water Records                                                                                                             |                                       | Casing Record (                                         |                                                    | urface Conductor & Production) |                                                                                                              |                             |                                                                                                             |  |
| Formation                                                                                                                             | Content                               | From                                                    | То                                                 | Size                           | Put In                                                                                                       | Pulled Ou                   |                                                                                                             |  |
|                                                                                                                                       |                                       |                                                         |                                                    | 65                             | /8 1147                                                                                                      | -0                          |                                                                                                             |  |
|                                                                                                                                       |                                       |                                                         |                                                    | 4 1                            | /2 1162                                                                                                      | 34                          | 9 Kover                                                                                                     |  |
|                                                                                                                                       |                                       |                                                         |                                                    |                                |                                                                                                              |                             | AVATION DIVISION                                                                                            |  |
|                                                                                                                                       | · · · · · · · · · · · · · · · · · · · |                                                         |                                                    |                                |                                                                                                              |                             |                                                                                                             |  |
| Describe in detail the manner<br>hole. If cement or other plug<br><u>Perforated at 11</u>                                             | s were used, state the .50 ft. Shot c | character of s                                          | ame depth pla<br>t 509 ft                          | ced from (botto<br>. Did no    | m), to (top) for each t come. Sho                                                                            | ch plug set.<br>Dt casing a | t 349 ft.                                                                                                   |  |
| pulled loose. Ru                                                                                                                      |                                       |                                                         |                                                    |                                |                                                                                                              |                             |                                                                                                             |  |
| tubing to 509 ft                                                                                                                      |                                       |                                                         |                                                    |                                |                                                                                                              |                             |                                                                                                             |  |
| Run thing to 350                                                                                                                      | ) ft. and pump                        | ed 105                                                  | sax cemei                                          | nt. Found                      | d top of ce                                                                                                  | ement at 17                 | 0 ft. Ran                                                                                                   |  |
| Name of Plugging Contractor:                                                                                                          | tubing to 17                          | '0 ft. a                                                | nd pumpe                                           | d 90 sax                       | cement to                                                                                                    | surface.                    |                                                                                                             |  |
| Address: R.R.A., INC                                                                                                                  | . 100 S. Mair                         | , Suite                                                 | 510, Wie                                           | chita, K                       | ansas 6720                                                                                                   | )2 Licens                   | e No. 5656                                                                                                  |  |
| Name of Party Responsible for                                                                                                         | or Plugging Fees:                     | R.R. 2                                                  | Abderhal                                           | len                            |                                                                                                              | •                           |                                                                                                             |  |
| State of Kansas                                                                                                                       | County,                               | Sedgwic                                                 | k                                                  | , SS.                          |                                                                                                              |                             |                                                                                                             |  |
|                                                                                                                                       |                                       |                                                         |                                                    | (Employee of                   | Operator) or (Operator)                                                                                      | ator) on above-desc         | cribed well, being first duly                                                                               |  |
| sworn on oath, says: That I ha                                                                                                        | ave knowledge of the fa               | acts statement                                          | ts, and matters                                    |                                |                                                                                                              |                             |                                                                                                             |  |
| same are true and correct, so                                                                                                         |                                       |                                                         | DD                                                 | alid                           | leihal                                                                                                       | elin                        |                                                                                                             |  |
| A NOTARY PUBLIC - Sta                                                                                                                 | to of Kanese                          |                                                         |                                                    |                                |                                                                                                              |                             |                                                                                                             |  |
| VERDELLA                                                                                                                              | LEWIS (A                              | (Address) 100 S. Main, Suite 510, Wichita, Kansas 67202 |                                                    |                                |                                                                                                              |                             |                                                                                                             |  |
| My Appt. Exp                                                                                                                          | SUBSCRIBED and SW                     | SWORN TO before me this _18th day of November, 2008     |                                                    |                                |                                                                                                              |                             | 2008                                                                                                        |  |
|                                                                                                                                       | Cerdel                                | la K                                                    | ever                                               |                                | Commission Expire                                                                                            | s:6.                        | 6-10                                                                                                        |  |
|                                                                                                                                       |                                       | Notary Publ                                             | ic                                                 |                                |                                                                                                              |                             |                                                                                                             |  |

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

RECEIVEL KANSAS CORPORATION COMMISSION