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: LARSON ENGINEERING, INC.					API Number: 15-009-16375-00-00		
Address: 562 WEST STATE ROAD 4 OLMITZ, KS 67564-8561					Lease Name: SCHNEIDER B		
Phone: (620)653-7368 Operator License #: 3842					Well Number: 11		
Type of Well: OIL Docket #: (Oil, Gas, D&A, SWD, ENHR, Water Supply Well, Cathodic, Other) (If SWD or ENHR)					Spot Location (QQQQ): _ C S2 S2 NW		
The plugging proposal was approved on: 6/17/2008 + (Date)							
by: CASE MORRIS (KCC District Agent's Name)					1370_ Feet from		
rls ACO-1 filed? ☐ Yes ☐ No ─rlf not; is well log attached? - ☐ Yes - ☐ No					- Sec. <u>1</u> Twp. <u>16 </u> SR. <u>14</u> -		
Producing Formation(s): List All (If needed attach another sheet)					County: BARTON		
ARBUCKLE OPEN H	HOLE Depth to Top: 3	278 Bottor	m: <u>3294</u> T	.D. <u>3294</u>	Date Well Completed	i:SPUD 11/2	2/1939
Depth to Top: Bottom:				.D	Plugging Commenced: 6/24/2008		
	Depth to Top:	Bottom: T.D			Plugging Completed: 6/26/2008		
Show depth and thicknes	s of all water, oil and gas	formations.					
Oil, Gas or W				Surface, Conductor & Production)			
Formation	Content	From	То	Size	Put In	Pulled Out	,
ARBUCKLE	OIL	0	657	8-5/8	657	0	
		0	3278	4-1/2	3278	0	
Describe in detail the man hole. If cement or other p CO 4-1/2" CSG TO		character of sar	me, depth plac	ed from (bottom	i), to (top) for each plug	set.	•
1568'. SPOTTED 50	0 SX CMT @ 753' &	CIRC CMT T	O SURFAC	E. TRIED TO	D PUMP DOWN 8-5.	/8" & BLEW NIPPI	LE OFF CSG
HEAD. PUMPED 50	0 SX CMT DOWN 4-	1/2" CSG & 0	CIRC CMT C	OUT 8-5/8"X	1-1/2" ANNULUS. P	LUGGED W/ 225	SX 60-40 POZ
W/ 4% GEL, 7 SX G						i y a z	· · · · · · · · · · · · · · · · · · ·
Name of Plugging Contra					License #:		RECEIVE
Address: P.O. BOX 19	9 VICTORIA, KS 67	671-0019		· · · · · · · · · · · · · · · · · · ·		KANS	SAS CORPORATION
Name of Party Responsib	ole for Plugging Fees:	LARSON E	NGINEERIN	IG, INC.	-	· 	APR 0 2 20
State of KANS	SAS County,_	BAF	RTON	, ss.			CONSERVATION DI
	CAROL LARSON				Operator) or (Operator) o		ell, being first duly S
sworn on oath, says: The same are true and correct		e facts, stateme	ents, and matte	rs herein conta	ined, and the log of the a	above-described well i	s as filed, and the
		(Signature)	ر"	une 1		SECRETARY/	TREASURER
		(Address)_	562 WES	STATE RO	AD 4 OLMITZ, K	S 67564-8561	
DEBRA J. LUDWIG	SUBSCRIBED and	SWORN TO be	efore me this_	31ST day of	MAI	RCH	,2009
otary Public - State of Kans Expires 5/5/201	sas II II A A A	Notary Pyt	der C	9N	ly Commission Expires:	5/5/201	2

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