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

Lesse Operator: Lone V	15-049-20466-00-00						
Address: Box 241 Moline, Ks 67353					API Number: 15 - UNKNOWN		
					Lease Name: Wiseman		
Phone: (620 ) 647 - 3626 Operator License #: 31119					Well Number: 3		
Type of Well: Oil (Oil, Gas D&A, SWD, ENHR, Water Supply Well, Cathodic, Other)  Oil (SWD or ENHR)					Spot Location (QQQQ): NW		
			(HS)	ND or EMHR)	4348 Feet 1	from North	South Section Line
The plugging proposal was approved on: 8-26-08  by: Duane Sims					7376 Feet 1	from 🗹 East /	West Section Line
(KCL Instrict Agent's Name)					Sec. 13 Twp. 31 S. R. 9 Fast West		
is ACO-1 filed? Yes V No If not, is well log attached? Yes V No					County: Elk		
Producing Formation(s): List All (If needed attach another sheet)  Mississippi 2294 2 2302 2313					Date Well Completed: 12-2-77		
Bosom: ZOOZ TD ZO13					Plugging Commenced: 8-26-08		
Depth to Top: Bottom: T.D					Plugging Completed: 8-26-08		
Depth to Top: Bottom; T.U.					Ployging Completed:		
Show depth and thickness of	<del></del>	formations,					
OR, Gas or Wa	Content				Surface Conductor & Production)		
Surface		0	То	Size	Put In	Pulled (	hut
	0.1				unkown	0	
Mississippi	Oil	2294	2302	4 1/2	2313	514	
	·	1					
Describe in detail the manner hole. If cament or other plug Filled well with sand at up to casing. Break get spacer to 500ft. She	nd lime chips to 22 ccirculation with	280 ft. Mix 6 water, N	same depth pl sx. cemen fix 15 sx.	aced from (botto t and ran with 60/40 pozn	m), to (top) for eac bailer to 2280, nix cement v	h plug set. . Perf. 4 1/2 co with 4% gel	asing at 760 ft. Hook
Top off well with comer			e, it poeis	Compile Ain	14% gel Circuia	ite to top. Pull	BO 514 Tr casing.
Name of Plugging Contractor: C & G Drilling Inc.					License #:3	2701	RECEIVED
Address: 303 S. High E	ureka, Ks. 670	45		· · · · · · · · · · · · · · · · · · ·			APR 2 9 2009
Name of Party Responsible to	or Plugging Fees: LOI	ne Wolf C	il dba				M 16 7 2 5002
State of Ks.	County.	Elk		_ , 56.			KCC WICHITA
Rob Wolfe				-		•	
Swom on cath, says: That I ha	eve knowledge of the I	acts statemen	ts, and matters	_ (Employee of ( s herein contains	Denator) or (Operat id. and the loc of th	tor) on above-des	cribed well, being first duly
same are true and correct, so	Tiop aid God.	Signature)	Tol	ut D	Olfr	and and describe	no weni is es ineo, and the
(Address) Box 241 Moline, Ks. 67353							
	SUBSCRIBED and SV		9	Ulh	( Detrois		- 52
A LISA J. TOWNSL Notary Public - State of Ki y Appt. Expires 6-13-12-	EY L	Motern Publi	usler	Only or My C	ommission Expires	6-13-	2012 2012
	<i>-</i>	~3	$\sim$				