

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
March 2009
Type or Print on this Form
Form must be Signed
All blanks must be Filled

009-04919-0000

OPERATOR: License #: 3273
Name: Herman L. Loeb LLC
Address 1: P.O. Box 838
Address 2: _____
City: Lawrenceville State: IL Zip: 62439 + 0524
Contact Person: George Payne
Phone: (812) 453-0385
Type of Well: (Check one) Oil Well Gas Well OG D&A Cathodic
 Water Supply Well Other: _____ SWD Permit #: _____
 ENHR Permit #: _____ Gas Storage Permit #: _____
Is ACO-1 filed? Yes No If not, is well log attached? Yes No
Producing Formation(s): List All (If needed attach another sheet)
Arbuckle Depth to Top: 3393' Bottom: 3400' T.D. 3402.5'
_____ Depth to Top: _____ Bottom: _____ T.D. _____
_____ Depth to Top: _____ Bottom: _____ T.D. _____

API No. 15 - NA - Drilled in 1957
Spot Description: _____
NE SW NE Sec. 21 Twp. 20 S. R. 12 East West
3630 Feet from North / South Line of Section
1650 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Barton
Lease Name: Hulme Well #: B #5
Date Well Completed: 1957
The plugging proposal was approved on: 4/01/09 (Date)
by: Case Morris (KCC District Agent's Name)
Plugging Commenced: 4/01/09
Plugging Completed: 4/03/09

KCC
ACT
APR
CP2/3

Show depth and thickness of all water, oil and gas formations.

Oil, Gas or Water Records		Casing Record (Surface, Conductor & Production)			
Formation	Content	Casing	Size	Setting Depth	Pulled Out
			8 5/8"	243'	0
			5 1/2"	3475'	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.

4/01/09 Set 5 1/2" CIBP @ 3160'. TIH to 3173'. Allied pumped 10 sxs of gel followed by 25 sxs 60/40 4%. TOOH 4/03/09 Perf. 2 holes @ 1400' 2 hole @ 650' 2 holes @ 150'. TIH to 1401'. Allied mixed and pumped 125 sxs 60/40 4% and circ cement thru 5 1/2". SI 5 1/2", pumped 25 more sxs and circ cement thru 8 5/8". Lay down tbg. Hooked onto 5 1/2", pumped 25 more sxs and circ cement thru 8 5/8" again. SI 8 5/8", press up to 300# and Shut 5 1/2" in. RDMO.

Plugging Contractor License #: 5105 Name: Clarke Corporation Inc.
Address 1: 107 W. Fowler Address 2: _____
City: Medicine Lodge State: Ks Zip: 67104 + _____
Phone: (620) 886-5665
Name of Party Responsible for Plugging Fees: Herman L. Loeb LLC
State of KS County, Barton, ss.
Alan Vratil Employee of Operator or Operator on above-described well,
(Print Name)

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: Alan Vratil

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

RECEIVED

APR 07 2009

CONSERVATION DIVISION
WICHITA, KS

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