

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

OPERATOR: License #: 6039
Name: L. D. DRILLING, INC.
Address 1: 7 SW 26 AVE.
Address 2: _____
City: GREAT BEND State: KS Zip: 67530 + 6525
Contact Person: L. D. DAVIS
Phone: (620) 793-3051
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)
_____ Depth to Top: _____ Bottom: _____ T.D. _____
_____ Depth to Top: _____ Bottom: _____ T.D. _____
_____ Depth to Top: _____ Bottom: _____ T.D. _____

API No. 15 - 197-20275-00-00
Spot Description: _____
SW. NE NE Sec. 16 Twp. 13 S. R. 13 East West
990 Feet from North / South Line of Section
990 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: WABAUNSEE
Lease Name: DOROTHY WENDLAND Well #: 1
Date Well Completed: _____
The plugging proposal was approved on: 11/25/08 (Date)
by: LEVI SHORT (KCC District Agent's Name)
Plugging Commenced: 11/25/08
Plugging Completed: 11/25/08

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
		SURFACE	8 5/8"	300'	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.

1st Plug @ 3040' w/ 15 sx;
2nd Plug @ 1150' w/ 15 sx;
3rd Plug @ 350' to Surface w/ 150 sx; & Top off Well
Total 180 sx 60/40 Pozmix, w/ 4% Gel;
By Consolidated; Plug Down @ 3:00 P.M. on 11/25/08

RECEIVED
KANSAS CORPORATION COMMISSION

APR 09 2009

CONSERVATION DIVISION
WICHITA, KS

Plugging Contractor License #: 32548 Name: KAN-DRILL, INC.
Address 1: 610 E. MAIN STREET Address 2: _____
City: BLUE MOUND State: KS Zip: 66010 + _____
Phone: (913) 756-2619
Name of Party Responsible for Plugging Fees: L. D. DRILLING, INC.
State of KANSAS County, BARTON, ss.
SUSAN SCHNEWEIS 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: _____