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

Form CP-4 March 2009 Type or Print on this Form Form must be Signed All blanks must be Filled

## WELL PLUGGING RECORD K.A.R. 82-3-117

OPERATOR: License #: 3273				API No. 15 - 199-20,073-00-00				
Name: Herman Loeb				Spot Description:				
Address 1: PO Box 524				SW SW SW 4 Sec. 33 Twp. 15 S. R. 42 East West				
Address 2:				330 Feet from North / South Line of Section				
City: Lawrenceville State: ILL Zip: 62439 + 0524				4,950 Feet from East / West Line of Section				
Contact Person: Ed Loeb Phone: (618 ) 943-2227				Footages Calculated from Nearest Outside Section Corner:				
Type of Well: (Check one) ✓ Oil Well Gas Well OG D&A Cathodic				NE NW SE SW				
Water Supply Well Other: SWD Permit #:				County: Wallace Lease Name: Smith BS Well #: 2				
ENHR Permit #: Gas Storage Permit #:					ne: <u>Smith BS</u> Completed: <u>07/17/</u>		#:	
Is ACO-1 filed?   Yes No If not, is well log attached?   Yes No				The plugging proposal was approved on: 04/22/2009 (Date)				
Producing Formation(s): List All (If needed attach another sheet)				by: Case Morris (KCC District Agent's Name)				
<u>marrow</u> Depth to Top: <u>5124</u> Bottom: <u>5137</u> T.D. <u>5248</u>				Plugging Commenced: 04/23/2009				
Depth to Top: Bottom: T.D.				Plugging Completed: 04/24/2009				
Depth to Top: Bottom:T.D								
Show depth and thickness of	all water, oil and gas forma	ations.	•					
Oil, Gas or Water Records Casing				Record (Surface, Conductor & Production)				
Formation Content		Casing	Size		Setting Depth	Pulled Out		
			8 5/8		1709	none		
ļ			5 1/2		5248	none		
		-			0210	110110		
			1,			<u> </u>		
Set CIBP @ 5050, 50 sx cement mixe tubing to 1680 pur 5/8 casing. Pulled 5 1/2 casing & plug	perforated @ 2 ed w/150# hulls, nped 350 sxs mit tubing to surface	same depth placed from (both 760 & 1680 ft., rand pulled tubing to 27 xed w/350# hulls.	ttom), to (t tubing 760, pu Ceme	g to 499 umped 2 nt circul	plug set. 0 ft. Pumped 200 sxs mixed ated to surfac	19 sx gel fo w/ 500# hu e from 5 1/ ement, circ	ollowed I ulls, pullo 2 casing ulated fr	by ed g to 8
					<b>.</b>		MAY 0 7	7 2000
Plugging Contractor License			Name: _	Easterr	n Colorado Well	S Service		<u>LUUJ</u>
Address 1: PO Box 244			Address	2:			RECE	WED
City: Cheyenne Wells				State: CC	)	Zip: <u>80810</u>	+_	
Phone: (719 ) 767-51	00			-				
Name of Party Responsible for	or Plugging Fees: <u>Herr</u>	nan Loeb						
State of ILL	County,			, SS.				
Shane Pelton (Print Name)				Employee of Operator or Operator on above-described well,				
being first duly sworn on oath the same are true and correct	, says: That I have knowle	dge of the facts statements, a	and matter	s herein con	tained, and the log of	the above-describ	ed well is as	s filed, and
Signature:				<del> </del>				
								Λ.