

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 #: 31406
Name: Prairie Resources, Inc.
Address 1: 2530 NW Willow Road
Address 2: _____
City: Medicine Lodge State: KS Zip: 67104 + 8140
Contact Person: Robert W. Packard
Phone: (620) 886-3431
Type of Well: (Check one) Oil Well Gas Well OG D&A Cathodic
 Water Supply Well Other: FAU 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)
Lansing Depth to Top: 3890 Bottom: 3893 T.D. 4100 PBDT
_____ Depth to Top: _____ Bottom: _____ T.D. _____
_____ Depth to Top: _____ Bottom: _____ T.D. _____

API No. 15 - 007-21930 - 00 - 01
Spot Description: _____
C NE NW Sec. 36 Twp. 31 S. R. 13 East West
4,620 Feet from North / South Line of Section
3,300 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Barber
Lease Name: Kimball 2 Well #: 2-C
Date Well Completed: September, 1984
The plugging proposal was approved on: May 18, 2009 (Date)
by: Lyn Reimer (KCC District Agent's Name)
Plugging Commenced: May 21, 2009
Plugging Completed: May 21, 2009

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
Lansing	oil / water	Surface	8 5/8"	350'	None
		Production	4 1/2"	4214'	2488'

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 @ 600' with 50 sx cmt & 10 sx gel. 2nd plug @ 390' with 50 sx cement. 3rd plug @ 40' to surface with 10 sx cement.

RECEIVED
JUN 08 2009
KCC WICHITA

Plugging Contractor License #: 5105 Name: Clarke Corporation
Address 1: P. O. Box 187 Address 2: _____
City: Medicine Lodge State: KS Zip: 67104 + 8140
Phone: (620) 886-5665
Name of Party Responsible for Plugging Fees: Prairie Resources, Inc.
State of Kansas County, Barber, ss.
Robert W. Packard 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: Robert W. Packard PRESIDENT

ALLIED CEMENTING CO., LLC. 34118

REMIT TO P.O. BOX 31
RUSSELL, KANSAS 67665

SERVICE POINT:
Medicine Lodge, Ks

DATE <i>05 21 09</i>	SEC. <i>36</i>	TWP. <i>31s</i>	RANGE <i>13w</i>	CALLED OUT <i>8:30 AM</i>	ON LOCATION <i>9:15 AM</i>	JOB START <i>10:00 AM</i>	JOB FINISH
LEASE <i>Kimball</i>	WELL # <i>2-C</i>	LOCATION <i>Medicine Lodge Shop - 6 mi, 1 1/2 s</i>			COUNTY <i>Butler</i>	STATE <i>KS</i>	
<input checked="" type="radio"/> OLD OR NEW (Circle one)			<i>efloat</i>				

CONTRACTOR *Clonko w/s*
 TYPE OF JOB *Old Hole Plug*
 HOLE SIZE *7 7/8* T.D.
 CASING SIZE *8 5/8* DEPTH
 TUBING SIZE *2 7/8* DEPTH *600'*
 DRILL PIPE DEPTH
 TOOL DEPTH
 PRES. MAX *300* MINIMUM -
 MEAS. LINE SHOE JOINT -
 CEMENT LEFT IN CSG.
 PERFS.
 DISPLACEMENT *Fresh H₂O*

OWNER *Prarie Resources*
 CEMENT *120*
 AMOUNT ORDERED *50sf 60:40:4% gel*
\$ 10sf gel

EQUIPMENT
 PUMP TRUCK CEMENTER *D Felia*
 # *372* HELPER *C. Balding*
 BULK TRUCK
 # *339* DRIVER *~~Balding~~*
 BULK TRUCK
 # *N/A* DRIVER *T. Becken*

COMMON _____ @ _____
 POZMIX _____ @ _____
 GEL _____ @ _____
 CHLORIDE _____ @ _____
 ASC _____ @ _____
 _____ @ _____
 _____ @ _____
 _____ @ _____
 _____ @ _____
 _____ @ _____
 _____ @ _____
 _____ @ _____
 _____ @ _____
 HANDLING _____ @ _____
 MILEAGE _____ @ _____

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 KCC WICHITA

REMARKS:

*Tubing at 600', Load Hole w/ gel water, establish
 Circ. Mix 50sf 60:40 cement, Dis. w/
 1 1/2 bbls Fresh H₂O, Tubing at 390', est.
 Circ. Mix 50sf 60:40 cement, Dis. w/ 3/4
 bbls Fresh H₂O, tubing at 0', est' Circ.
 mix 20sf 60:40 cement, Circ. to Surface*

SERVICE

DEPTH OF JOB *600'*
 PUMP TRUCK CHARGE _____
 EXTRA FOOTAGE _____ @ _____
 MILEAGE *5* _____ @ _____
 MANIFOLD _____ @ _____
 _____ @ _____

CHARGE TO: *Prarie Resources*
 STREET _____
 CITY _____ STATE _____ ZIP _____

TOTAL _____

PLUG & FLOAT EQUIPMENT

None _____ @ _____
 _____ @ _____
 _____ @ _____
 _____ @ _____
 _____ @ _____
 TOTAL _____

To Allied Cementing Co., LLC.
 You are hereby requested to rent cementing equipment and furnish cementer and helper(s) to assist owner or contractor to do work as is listed. The above work was done to satisfaction and supervision of owner agent or contractor. I have read and understand the "GENERAL TERMS AND CONDITIONS" listed on the reverse side.

SALES TAX (If Any) _____
 TOTAL CHARGES _____
 DISCOUNT _____ IF PAID IN 30 DAYS

PRINTED NAME *BOB PACKARD*
 SIGNATURE *Bob Packard*