

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 #: 31514
Name: Thoroughbred Assoc. LLC
Address 1: 8100 East 22nd St. N. Bldg. 600, Suite F
Address 2: _____
City: Wichita State: KS Zip: 67226 + _____
Contact Person: _____
Phone: (316) 685-1512
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

API No. 15 - 033-21-0210000
Spot Description: _____
SW SW NE _____ Sec. 21 Twp. 32 S. R. 19 East West
2,310 Feet from North / South Line of Section
2,310 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Comanche
Lease Name: Jaimie Well #: 1
Date Well Completed: _____
The plugging proposal was approved on: 10/7/2009 (Date)
by: Eric MacLaren (KCC District Agent's Name)
Plugging Commenced: 10/8/2009
Plugging Completed: 10/14/2009

Producing Formation(s): List All (if needed attach another sheet)
_____ Depth to Top: 4946 Bottom: 4951 T.D. 5278
_____ Depth to Top: 4991 Bottom: 5003 T.D. 5278
_____ Depth to Top: 5160 Bottom: 5166 T.D. 5278

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
			20"	100'	none
			8 5/8	710'	none
			5 1/2	5278'	2500'

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.

Bridge plug set at 4900', 2 sacks cement spot with dump bailer, casing load with salt water, cut 4 1/2 casing at 2500' and remove, run 2 3/8 tubing to first plug 740', spot 12 sacks jell, 50 sacks 60/40 poz, 4% jell, 2nd 300', 50 sacks, 3rd 60' 20 sacks.
10/15 - measure 2'

RECEIVED
KANSAS CORPORATION COMMISSION

OCT 19 2009

Plugging Contractor License #: 5105 Name: Clarke Corporation
Address 1: P.O. Box 187 Address 2: _____
City: Medicine Lodge State: Kansas Zip: 67104 + _____
Phone: (620) 886-5665
Name of Party Responsible for Plugging Fees: Thoroughbred Assoc. LLC
State of Kansas County, Barber ss. _____

CONSERVATION DIVISION
WICHITA, KS

Mark Morgenstern 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: Mark Morgenstern

PKT