

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 #: 5474  
Name: Northern Lights Oil Co. LLC  
Address 1: P.O. Box 164  
Address 2: \_\_\_\_\_  
City: Andover State: Ks. Zip: 67002 + 0164  
Contact Person: Kurt Smith  
Phone: (316) 733-1515  
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)

API No. 15 - 185-21409-0000  
Spot Description: NE NW SW  
nzn enwsu Sec. 13 Twp. 24 S. R. 15  East  West  
300 2340 Feet from  North  South Line of Section  
900 Feet from  East  West Line of Section  
Footages Calculated from Nearest Outside Section Corner:  
 NE  NW  SE  SW  
County: Stafford  
Lease Name: English Reid Well #: 5  
Date Well Completed: \_\_\_\_\_  
The plugging proposal was approved on: \_\_\_\_\_ (Date)  
by: Richard Lacey (KCC District Agent's Name)  
Plugging Commenced: 8-12-09  
Plugging Completed: 8-17-09

KCC PRT  
PER OPS

Depth to Top: \_\_\_\_\_ Bottom: \_\_\_\_\_ T.D. \_\_\_\_\_  
Depth to Top: \_\_\_\_\_ Bottom: \_\_\_\_\_ T.D. \_\_\_\_\_  
Depth to Top: \_\_\_\_\_ Bottom: \_\_\_\_\_ T.D. \_\_\_\_\_

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"	505'	None
			5-1/2"	4347'	2210'

RECEIVED  
SEP 11 2009  
KCC WICHITA

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.

Plugged off bottom with sand to 3800' and 5 sxs. cement. Cut casing loose @2210', pulled up to 950'. pumped 15 sxs. gel amd 50 sxs. cement. pulled up to 550', pumped 50 sxs. cement. pulled up to 40' and circulated 20 sxs. cement to surface. 60/40 pos, 10% Gel. Plugging Complete.

Plugging Contractor License #: 31529 Name: Mike's Testing & Salvage, Inc.  
Address 1: P.O. Box 467 Address 2: \_\_\_\_\_  
City: Chase, State: Kansas Zip: 67524 + 0467  
Phone: (620) 938-2943  
Name of Party Responsible for Plugging Fees: Northern Lights Oil Company, LLC.

State of Kansas County, Rice, ss.  
Mike Kelso  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: Mike Kelso

PRT