

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 #: 34170
Name: Sidus Energy Corp.
Address 1: 526 Country Place South
Address 2: _____
City: Abilene State: TX Zip: 79606 + 7032
Contact Person: Randy Teter
Phone: (281) 818 3450
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 (Red)? Yes No If not, is well log attached? Yes No
Producing Formation(s): List All (If needed attach another sheet)
Squimel Depth to Top: 600 Bottom: 680' T.D. 700"
Depth to Top: _____ Bottom: _____ T.D. _____
Depth to Top: _____ Bottom: _____ T.D. _____

API No. 15- 003-01796-00-00
Spot Description: S/
17.55 Feet from North / South Line of Section
49.90 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: ANDERSON
Lease Name: WEST VAN WINNE K-27
Date Well Completed: N/A
The plugging proposal was approved on: 2-27-09 (Date)
by: Levi Short (KCC District Agent's Name)
Plugging Commenced: _____
Plugging Completed: 2-27-09

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
		<u>SURFACE</u>	<u>6"</u>		
		<u>PRODUCTION</u>	<u>2"</u>		

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.

RAN 588' 3/4" pipe filled 2" 10 SACK
outside 275 TO SURFACE 130 SACKS

RECEIVED
KANSAS CORPORATION COMMISSION
SEP 28 2009

Plugging Contractor License #: 33961 34170 Name: Consolidated Oil Well Service LLC
Address 1: SAME AS ABOVE Address 2: _____
City: SAME State: _____ Zip: _____
Phone: 785 448-8571

Name of Party Responsible for Plugging Fees: Sidus Energy Corp., 526 Country Place South, Abilene, TX 79606-7032
State of Texas County: _____ ss. _____
Kasper Nielsen, CEO (Print Name) Employee of Operator or Operator on above-described well,

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: Kasper Nielsen

Mail to: KCC - Conservation Division, 130 S. Market - Room 2078, Wichita, Kansas 67202

Handwritten initials/signature