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 #:	4656			API No. 15 - 185-22688 - 0000											
Name: Davis Petroleum, Inc.				Spot Description: Sesw SE SW											
Address 1: 7 sw 26 Avenue				Sec. 5 Twp. 22 S. R. 11 East West											
Address 2:				330 Feet from South Line of Section											
City: Great Bend State: Ks. zip: 67530 +															
Contact Person: <u>L.D. Davis</u> Phone: (620) 793-3051				Footages Calculated from Nearest Outside Section Corner: NE NW SE SW											
Type of Well: (Check one) ✔ Oil Well Gas Well GG D&A Cathodic				County: Stafford											
Water Supply Well Other: SWD Permit &:				Lease Name: Sleeper Well #: _1											
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) Depth to Top: Bottom: T.D Depth to Top: Bottom: T.D				Date Well Completed: The plugging proposal was approved on: Well #											
								Depth to Top: Bottom: T.D				Plugging Completed: 9-4-09			
										1.b.					
								Show depth and thicknes		formations.					
				ing Record (Surface, Conductor & Production)											
Formation	Content	Casing	Size		Setting Depth	Pulled Out									
			8-5/8	11	310'	None									
			4-1/2"		3589'	1000'									
Plugged off bott pumped 10 sxs.	re used, state the charac com with sand to gel and 50 sxs	plugged, indicating where the reter of same depth placed from the office of same depth placed from the office of sacks and the company of the office of sacks are sacks and the company of sacks are sacks and the company of sacks are sack	cement to 320',	top) for each Cut ca pumped	^{plug set.} sing loose (! 50 sxs. cer	@1000', pulled nent, pulled up	up to 600'								
Plugging Contractor Licen	_{ise #} . 31529		Name: _	Mike's T	esting & Salv		EP 17 Q 069 ERVATION DIVISION								
D O D 407					3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3	, ugo, 1110.	WICHITA: KS								
City: Chase,				State: Kansas Zip: 67524 + 0467											
Phone: (620) 938	-2943														
	le for Plugging Fees: _D	avis Petroleum, Inc.													
State of Kanas	Cou	nty, Rice		_ , ss.											
Mike Kelso (Print Name)				Employee of Operator or Operator on above-described well.											
he same are true and coriا مصد	eath, says: That I have known	owledge of the facts statements	s, and matter	s herein conta	ained, and the log o	- •									