



Notice: Fill out COMPLETELY and return to Conservation Division at the address below within 60 days from plugging date.

KANSAS CORPORATION COMMISSION 1033328
 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 #: 6039
 Name: L.D. Drilling, Inc.
 Address 1: 7 SW 26TH AVE
 Address 2: _____
 City: GREAT BEND State: KS Zip: 67530 + 6525
 Contact Person: L.D. Davis
 Phone: (620) 793-3051
 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)
 _____ Depth to Top: _____ Bottom: _____ T.D. _____
 _____ Depth to Top: _____ Bottom: _____ T.D. _____
 _____ Depth to Top: _____ Bottom: _____ T.D. _____

API No. 15-135-24706-00-00
 Spot Description: _____
 SW SW NE SE Sec. 11 Twp. 20 S. R. 26 East West
1,360 Feet from North / South Line of Section
1,315 Feet from East / West Line of Section
 Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
 County: Ness
 Lease Name: JAMES Well #: 2-11
 Date Well Completed: _____
 The plugging proposal was approved on: _____ (Date)
 by: _____ (KCC District Agent's Name)
 Plugging Commenced: 09/29/2009
 Plugging Completed: 09/29/2009

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

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.

Tie on 4 1/2" Casing. Mix 40 sx 60/40 Pozmix, 4% Gel w/ 200# Hulls. Mix 15 sx gel, Mix 120 sx cement.
 Pressured up to 900# shut in. Tie on Annulus. Mix 10 sx. Pressured up to 400#.

RECEIVED
 NOV 3 0 2009

Plugging Contractor License #: 3004 Name: Gressel Oilfield Service, Inc.
 Address 1: PO BOX 607 Address 2: _____
 City: BURRTON State: KS Zip: 67020 + 0607
 Phone: (620) 463-5161
 Name of Party Responsible for Plugging Fees: L. D. DRILLING, INC.
 State of KANSAS County, BARTON, ss.
Susan Schneweis 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.

Submitted Electronically

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