

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 #: 5786
Name: McGown Drilling, Inc.
Address 1: P.O. Box K
Address 2: _____
City: Mound City State: KS Zip: 66056 + _____
Contact Person: Doug McGown
Phone: (913) 795-2258
Type of Well: (Check one) Oil Well Gas Well ~~Oil~~ 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 - 011-23647-00-00
Spot Description: _____
SW -SW- SW Sec. 28 Twp. 23 S. R. 25 East West
330 Feet from North / South Line of Section
330 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Bourbon
Lease Name: Wimmer Well #: 13-28
Date Well Completed: 10-07-09
The plugging proposal was approved on: 10-07-09 (Date)
by: Clayton (KCC District Agent's Name)
Plugging Commenced: 10-07-09
Plugging Completed: 10-07-09

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
		Surface	7"	20'	

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.

10 Sacks at TD - 250 to surface.

RECEIVED
OCT 26 2009
KCC WICHITA

Plugging Contractor License #: 5786 Name: McGown Drilling, Inc.
Address 1: P.O. Box K Address 2: _____
City: Mound City State: KS Zip: 66056 + _____
Phone: (913) 795-2258
Name of Party Responsible for Plugging Fees: McGown Drilling, Inc.
State of Kansas County, Linn, ss.
Doug McGown 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: _____
Mail to: KCC - Conservation Division, 130 S. Market - Room 2078, Wichita, Kansas 67202