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 #: 5663				API No. 15 - 113-20,675-00-00												
Name: Hess Oil Company																
Address 1: P. O. Box 1009				2.310 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												
Address 2:																
City: McPherson State: KS Zip: 67460 + 1009																
Contact Person: Bryan Hess																
Phone: (620) 241-4640 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 Producing Formation(s): List All (If needed attach another sheet)																
					County: McPherson											
				Lease Name, <u>IVICI VIII OOTRISOTI</u> Well #:												
								Mississippi Depth to Top: 2943' Bottom: 2963' T.D. 2963				Plugging Commenced: 11/23/2009				
								Depth to Top: Bottom: T.D								
Depth to	Тор: Во	ottom: T.D		, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	, , , , , , , , , , , , , , , , , , ,											
Show depth and thickness of a	all water, oil and gas fo	rmations.					,									
Oil, Gas or Water Records			Casing Record (Surface, Conductor & Production)													
Formation	Content	Casing	Size		Setting Depth	Pulled Out										
,		Surface	8.625	5	131	0										
		Production	4.5	•	2943	1195										
cement or other plugs were us Sanded off bottom	ed, state the character to 2850' and r cks 60/40 poz	rigged, indicating where the must of same depth placed from (b) an 4 sacks cement mix, 4% gel. Pulled	ottom), to	(top) for each of sand	i plug set. I. Cut casing	at 1195'. Pulle	ed to 450'									
						R	ECEIVED									
•	.8															
						ຍ	C 0 8 2009									
Plugging Contractor License #: 31529				Name: Mike's Testing & Salvage, Inc. KCC WICHITA												
Address 1: _ P. O. Box 467				Address 2:												
city: Chase				State: KS Zip: 67524 + 0467												
Phone: (620) 938-29	43			_												
Name of Party Responsible for	Plugging Fees: He	ss Oil Company														
State of Kansas	Count	_{y,} McPherson		, ss.												
Bryan Hess, President				Employee of Operator or Operator on above-described well,												
		viedge of the facts statements,	and matte			_ '	·									
he same are true and correct,	so help me God.	$\mathcal{O}_{\mathcal{L}} = \mathcal{O}_{\mathcal{L}}$	_				[
Signature:	110-10	you fler					m//									



Plugging REATMENT REPORT

Acid Stage No. Type Treatment: Amt. Type Fluid Sand Size Pounds of Sain Duty 11- 24-09 District C.B. F.O. No. (35639 Bkdown.....Bbl. /Gal. Company Hess Oil Company Itess O. Vell Name & No. Marnn Johnson 3-ABbi./Gai.Bbl. /Gal. Location......Field.......Field.... _____Bbi. /Gal. _____ County McDke.son State Ks FlushBbl. /Gal. Cusing Size 1/2 Type & Wt. Set at ft. from......ft. to...........ft. No. ft. Pormation: Perf. to from......ft. to.......ft. No. It...... Formation: Perf. to Actual Volume of Oll/Water to Load Hole:Bbl./Ga Formation: Perf. to Pump Trucks. No. Used: 8td. 370 Sp. Twin Packer: Set at Tubing: Size & Wt. Swung at fi. Auxiliary Tools..... Perforated from......ft. to......ft. Plugging or Sealing Materials: Type..... T.D._____ft. P.B. to.____ Open Hole Size.... ke I so Company Representative PRESSURES TIME Total Fluid Pumped Tubing Casing a.m /6.m. 41% :30) 0~ 3556. 6 Yua por. 4% gel. 250. 140 ets. Mix فكانكوره Nathan RECEIVED