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

OPERATOR: License #: 31409 Name: M&M Energy, Inc. Address 1: P.O. Box 21904

Phone: (405) 463-3355

Is ACO-1 filed? Yes No

Water Supply Well Other:

Producing Formation(s): List All (If needed attach another sheet)

Depth to Top: _____ __ Depth to Top: _____

Show depth and thickness of all water, oil and gas formations.

Content

Oil, Gas or Water Records

Address 2: ____ City: Okla. City,

Contact Person:

Formation

KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

March 2009 Type or Print on this Form

Form CP-4

WELL PLUGGING K.A.R. 82-3-11

_____ State: OK Zip: 73156 + ___.

Gas Storage Permit #:

SWD Permit #:

If not, is well log attached? Yes No

Bottom: ______ T.D. ____

Bottom: ______T.D. ___

Casing

____ T.D. -

Type of Well: (Check one) 🗸 Oil Well 📗 Gas Well 📗 OG 📗 D&A 📗 Cathodic

__ Depth to Top: _____ Bottom:

ING 2-3-117	RECOR		must be Signed s must be Filled		
2-3-117	Spot Descr Q 9 36 34 Footages C County: Lease Nam	iption: NV Sec. 4 O Feet Calculated from I NE NE NA Reno Re: Eagle R Completed:	R. 4 [/ South / West Section Corr	East West Line of Section Line of Section er:	
	by: B.J.	-	15-09		
Ci	D	:			· · · · · · · · · · · · · · · · · · ·
Size	Recora (Suriac	e, Conductor & F	Pulled Ou	.4	
8-5/8	1	317'	None		
4-1/2'		4270'	2624'	~	

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.

Set BP @3500' and dumped 2 sacks cemerifon top. Cut casing loose @2634', pulled up to 800', pumped 35 sxs. cement, pulled up to 400', pumped 200 sxs. cement and circulated to surface. Layed down rest of casing. Used 60/40 pos, 4% gel. Plugging Complete

RECEIVED

SEP 2 9 2009

and the second s	-	• 6		E 0 1000
Plugging Contractor License #: 31529	_ Name:Mil	ke's Testing & S	alvage, Inc. KCC	WICHITA
Address 1: P.O. Box 467	_ Address 2:	,	A CONTRACTOR OF THE CONTRACTOR	
City: Chase,	State	: Kansas	Zip: 67524	+ 0467
Phone: (620) 938-2943		;		
Name of Party Responsible for Plugging Fees: MM Energy, Inc.		1		
State of Kansas County, Rice	, ss.	Į.		
Mike Kelso (Print Name)		Employee of Operato	or or Operator on abov	e-described well,
being first duly sworn on oath, says: That I have knowledge of the facts statements,	and matters here	in contained, and the fo	og of the above-described w	ell is as filed, and
the same are true and correct, so help me God.				W
Signature: Mel Tuls		i i	,	