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

Form CP-4
March 2009
Type or Print on this Form
Form must be Signed
All blanks must be Filled

OPERATOR: License #:	038	N.A.N.	2-3-11	I APINo 15	_{5 -} <u>091-21117</u> .	-00-00								
Name: Frontier Land Company,Inc.				Spot Description: SE										
Address 1: 8605 Wenonga Lane														
Address 2: City: Leawood State: KS Zip: 22206 + Contact Person: John Carper Phone: (816) 983-8822 Type of Well: (Check one) Oil Well Gas 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)														
							Date Well Completed: 1/20/10 The plugging proposal was approved on: 1/15/10 (Date)							
											by: Taylor Herman (KCC District Agent's Name)			
											Squirrel Depth to Top: Bottom: T.D. 700'			
							Depth to Top: Bottom: T.D				Plugging Completed: 1/20/10			
				Depth to	Top: Botto	m:T.D								
				Show depth and thickness of a	all water, oil and gas forma	ations.								
				Oil, Gas or Water Records		Casing		Record (Surface, Conductor & Production)						
				Formation	Content	Casing	Size		Setting Depth	Pulled Out				
			ļ											
Describe in detail the manner cement or other plugs were us Run 4 1/2" pipe and	ed, state the character of	same depth placed from (bot	tom), to	(top) for each	plug set.	ods used in introducing it into the hole								
						RECEIVED								
						FEB 1 9 2010								
Plugging Contractor License #:33715				Town C	Dilfield Service,	Inc. KCC WICHITA								
Address 1: PO Box 339)		Address	s 2:										
City: Louisburg														
Phone: (913) 837-840				_										
Name of Party Responsible for	Plugging Fees: Front	ier Land Company, l	lnc.											
State of Kansas	County, _	Johnson	7,1121, 1	, \$S.										
				X Employee of Operator or Departor on above-described well,										
	(Print Name)													
being first duly sworn on oath, the same are true and correct	help me God.	ge of the facts statements, an	nd matte	ers herein con	tained, and the log of	the above-described well is as filed, a								