

**KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION**

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

**Well Plugging Record
K.A.R. 82-3-117**

Form CP-4
December 2003
Type or Print on this Form
Form must be Signed
All blanks must be Filled

Lease Operator: American Energies Corporation
Address: 155 North Market, Suite 710, Wichita, KS 67202
Phone: (316) 263 - 5785 Operator License # 5399
Type of Well: Gas Docket #: _____
(Oil, Gas, D & A, SWD, ENHR, Water supply Well, Cathodic, Other)
The plugging proposal was approved on: 2/2/2010 (Date)
by: Steve Bond (KCC District Agent's Name)
Is ACO-1 filed? YES No ACO-1 Attached, as well as logs and DST results
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 # 15-079-20405 - 0000
Lease Name: R. Graber
Well Number: #1
Spot Loc. (QQQQ): NE SW SW
~~908~~ FSL Feet from North/South Section Line
~~1220~~ FSL Feet from North/South Section Line
4016E Sec. 15-22S-2W East/West
County: Harvey
Date Well Completed: 7/17/1979
Plugging Commenced: 1/25/2010
Plugging Completed: 1/27/2010

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Ra GTS
6/30/09

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Show depth and thickness of all water, oil and gas formation:

OIL, GAS OR WATER RECORDS		CASING RECORD (Surface Conductor & Production)				
FORMATION	CONTENT	FROM	TO	SIZE	PUT IN	PULL OUT
Surface	Water sands	267'	0'	8 5/8" 23#	237'	None
Production		0'	3206'	4 1/2"	3206'	247'

Describe in detail the manner in which the well was 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 and depth placed, from (bottom), to (top) for each plug set.
1/25/10 - Ran in sand line, bdfidge @ 240', knocked it out. Ran in to 3120', put in 45 gallons sand.
1/26/10 - Tagged sand @ 3080'. Ran in 4 sx cement, casing was parted. Fished 7 jts 4 1/2" casing (247.50'). Ran in 453' of 2 3/8" tubing. Ran in 15 jts 1" tubing.
1/27/10 - Cemented with 35 sx down 1", pulled 1" tubing - 15 jts 375', pumped 165 sx down 2", pulled 15 jts 2" - 453'.

Name of Plugging Contractor: American Energies Corporation License #: 5399
Address 155 North Market, #710 City: Wichita State: Kansas Zip 67202

NAME OF PARTY RESPONSIBLE FOR PLUGGING FEES: American Energies Corporation (Operator)

STATE OF KANSAS COUNTY OF: Sedgwick, ss.

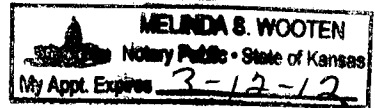
Alan L. DeGood, President (Employee of Operator or (Operator) of above described well, being first duly sworn on oath, says: That I have knowledge of the facts, statements, and matters herein contained and the log of the above-described well is as filed, and the same are true and correct, so help me God.

(Signature) *Alan L. DeGood*
(Alan L. DeGood, President, American Energies Corporation)

(Address) 155 North Market, Suite 710, Wichita, KS

SUBSCRIBED AND SWORN TO me this 10th day of February 2010

Melinda S. Wooten My Commission Expires: 3/12/12
Melinda S. Wooten, Notary Public



AMERICAN ENERGIES CORP.
P O BOX 516, 136 N MAIL
CANTON, KS. 67428

PULLING UNIT #1

JAN 28 2010

PHONE: 620-628-4424 FAX: 620-628-4435

10401017

DATE JOB STARTED 1/25/10
LEASE: Ruby Glade
COUNTY Harvey

DATE JOB COMPLETED: 1-27-10
WELL #

Acidizing Frac Well Perforating Well **Plugged well**
Squeeze Job Workover

WORK PERFORMED:
(Please circle appropriate job)

Pump Change:
New: Rebuilt Size of pump

Rod Part: Size & Type of Replacement
Rod Break-Number of Jts. Down Kind of Break

Tubing Failure:
Tubing leak-Number of Jts Down Kind of Break Size & Type of Replacement
Replaced with New or Used

Plugging Well: Please Complete Information

<u>4</u>	Number of Sacks cement at
<u>35</u>	Number of Sacks cement at
<u>165</u>	Number of Sacks cement at
	Number of Sacks cement at
	Total Number of Sacks of Cement

<u>3080</u>	feet
<u>375</u>	feet
<u>453</u>	feet
	feet

Type of Cement used:
Ticket number:
Cementing Company: Gresel
Date Plugging Completed: 1-27-10
State Plugging Agent: Shane

Description of Work Performed:
1/25/10 5:00-7:00 Rig up, run sand line, bridge at 240', knocked it out, run to 3120',
put in 45 gal sand in, shutdown
1/26/10 9:00-6:00 rig sand at 3080', run 4 sacks cement, casing was parted, fish 7jts 4 1/2" casing, 24750',
run 453' of 2 3/8" tubing, run 15 jts 1" tubing, shutdown
1-27-10 9:00-11:30 cement 35 sacks down 1" pull 1" tubing - 15 jts 375'
pumped 165 sacks down 2" pulled 15 jts - 2" 453' clean up & rig down
moved off

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Joins	Feet	Size	Pulled from Well:					Equipment	Joins	Feet	Size	Run in Well:				
								Packer								
								Anchor								
								Polished Rod								
								Rods								
								Rods								
			2'	4'	6'	8'	10'	Rod Subs				2'	4'	6'	8'	10'
								Pump								
7	247	4 1/2"						Tubing	7	247	4 1/2"					
			2'	4'	6'	8'	10'	Tubing Subs				2'	4'	6'	8'	10'
								Barrel								
								Mud Anchor								

Services	Hours	Per Hour	Amount
Unit and Power Tools	13 1/2	\$175.00	\$ 2362.50
Road Time - Per hour		\$175.00	\$
Supervisor time	13 1/2	\$40.00	\$ 540.00
Material Transfer			\$
Swab Cups			\$
Sales Tax			\$
Total Due			\$

Signed Douglas Ward Date: 1-27-10



FIELD ORDER N° C 35829

BOX 438 • HAYSVILLE, KANSAS 67060
316-524-1225

DATE 1-27-10 20

IS AUTHORIZED BY: American Energies (NAME OF CUSTOMER)

Address _____ City _____ State _____

To Treat Well As Follows: Lease Ruby Gordo Well No. 1 Customer Order No. _____

Sec. Twp. Range _____ County Noway State ks

CONDITIONS: As a part of the consideration hereof it is agreed that Copeland Acid Service is to service or treat at owners risk, the hereinbefore mentioned well and is not to be held liable for any damage that may accrue in connection with said service or treatment. Copeland Acid Service has made no representation, expressed or implied, and no representations have been relied on, as to what may be the results or effect of the servicing or treating said well. The consideration of said service or treatment is payable. There will be no discount allowed subsequent to such date. 6% interest will be charged after 60 days. Total charges are subject to correction by our invoicing department in accordance with latest published price schedules.

The undersigned represents himself to be duly authorized to sign this order for well owner or operator.

THIS ORDER MUST BE SIGNED BEFORE WORK IS COMMENCED. _____ By _____
Well Owner or Operator Agent

CODE	QUANTITY	DESCRIPTION	UNIT COST	AMOUNT
4101	75	mileage pump truck		75 ⁰⁰
4100	1	Pump Charge (Plus)		100 ⁰⁰
4000	200	2% add sel	9 ²⁵	1,850 ⁰⁰
4050	4	2% add sel	16 ⁵⁰	64 ⁰⁰
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4200	204	Bulk Charge	1251	255 ⁰⁰
4301		Bulk Truck Miles 5.987 x 25mi: 224.57mi x 1 ⁰⁰	1101	246 ⁰⁰
Process License Fee on _____ Gallons				
TOTAL BILLING				3,070⁰⁰

I certify that the above material has been accepted and used; that the above service was performed in a good and workmanlike manner under the direction, supervision and control of the owner, operator or his agent, whose signature appears below.

Copeland Representative Nathan L.

Station G.S.

David Lead
Well Owner, Operator or Agent

Remarks _____

NET 30 DAYS



TREATMENT REPORT

Acid Stage No.

Date: 1-27-10 District: C B F. O. No. C35829
 Company: American Energies
 Well Name & No.: Ruby Center #1
 Location: Field: _____
 County: Harvey State: KS
 Casing: Size: 4 1/2" Type & Wt. _____ Set at _____ ft.
 Formation: _____ Perf. _____ to _____ ft.
 Formation: _____ Perf. _____ to _____ ft.
 Formation: _____ Perf. _____ to _____ ft.
 Liner: Size: _____ Type & Wt. _____ Top at _____ ft. Bottom at _____ ft.
 Cemented: Yes/No. Perforated from _____ ft. to _____ ft.
 Tubing: Size & Wt. 1" 2 3/8" Hwng at _____ ft.
 Perforated from _____ ft. to _____ ft.
 Open Hole Size: _____ T.D. _____ Y.C.P. to _____ ft.

Type Treatment: Amt. Type Fluid Sand Size Pounds of Sand
 Bkdown: _____ Bbl./Gal. _____
 _____ Bbl./Gal. _____
 _____ Bbl./Gal. _____
 _____ Bbl./Gal. _____
 Flush: _____ Bbl./Gal. _____
 Treated from: _____ ft. to _____ ft. No. ft. _____
 from: _____ ft. to _____ ft. No. ft. _____
 from: _____ ft. to _____ ft. No. ft. _____
 Actual Volume of Oil/Water to Load Hole: _____ Bbl./Gal.
 Pump Trucks: No. Used: Std. 370 Sp. _____ Twin _____
 Auxiliary Equipment: 327
 Packer: _____ Set at _____ ft.
 Auxiliary Tools _____
 Hanging or Sealing Materials: Type _____

Company Representative: Dave Ward Treater: Nathan W.

TIME a.m./p.m.	PRESSURES		Total Fluid Pumped	REMARKS
	Tubing	Casing		
7:00	1" 2 3/8"	4 1/2"		On Location
				1" tubing @ 375' mix 35 sts. 60% up per
				40% sel. All 1" out.
				Tie on 2 3/8" @ 453' mix 165 sts
				Circulated to surface. Stayed full
				Thank You!
				Nathan W.

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