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 #: 33069				API No. 15 - 065-22,282 0000 VIII											
Name: Encore Operating Company				Spot Description:SW_ NW_ NE Sec. 26 Twp. 9 S. R. 21 East West											
Address 1: P.O. Box 27710															
Address 2:				990 Feet from North / South Line of Section											
City: <u>Denver</u> State: <u>Co</u> Zip: <u>80227</u> +															
Contact Person:				Footages Calculated from Nearest Outside Section Corner:    NE NW SE SW    SW											
								Depth to Top: Bottom: T.D				Plugging Completed: 3d/16 23, 2010			
								Depth to							
								Show depth and thickness of	all water, oil and gas form	nations.					
								Oil, Gas or Water Records Casing R				Record (Surface, Conductor & Production)			
								Formation	Content	Casing	Size	Setting Depth	Pulled Out		
									Fresh Water	Surface	8 5/8"	217'	None KAN	RECEIVED ISAS CORPORATION COMMISS	
Arbuckle	Oil ·	Production	5 1/2"	3848'	None	JUL <b>0 6 2</b> 010									
						ONSERVATION DIVISION WICHTA, KS									
Moved in and rigge Poz cement with 4' the tubing to 2290'	sed, state the character of ed up Summit W % Gel and 100 p and circulated f ell and topped th	Tell Service LLC. R pounds of hulls dow 175 sacks of cemer the 5 1/2" casing off	tom), to (top) for an tubing t vn the tubir nt and 400 with 25 sa	each plug set.  o 3716' and puring and circulated pounds of hulls cks of cement.	nped 100 sack d fluid to surfac to surface. Pu Hooked up to t	s of 60/40 ce. Pulled illed the the 8 5/8"									
Plugging Contractor License #: 34093			Name: Sur	ame: Summit Well Service LLC											
Address 1: P.O. Box 27710			Address 2:												
City: _Denver			State:	Co.	Zip: <u>80227</u>	· +									
Phone: (303) 595-9	251		***************************************												
Name of Party Responsible for	r Plugging Fees: _Enc	ore Operating Co	mpany	<u> </u>											
State of Colorado County, Denver															
Roland Nyp		Employee of Operator or	r Operator on abo	ve-described well,											
being first duly sworn on oath, the same are true and sorrect,		dge of the facts statements, ar	•												
Signature: <i></i>	1 /m2	<u> </u>													