

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 #: 5893
Name: Pratt Well Service, Inc.
Address 1: PO Box 907
Address 2: _____
City: Pratt State: KS Zip: 67124 + _____
Contact Person: Kenneth C. Gates
Phone: (620) 672-9571 ext 5
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 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 No. 15 - 047-20901-00-00
Spot Description: _____
NW-NE-NE Sec. 23 Twp. 24 S. R. 16 East West
330 Feet from North / South Line of Section
990 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Edwards
Lease Name: Paul Meyer Well #: 8
Date Well Completed: 09-25-1981
The plugging proposal was approved on: 01-25-2011 (Date)
by: Richard Lacey (KCC District Agent's Name)
Plugging Commenced: 1-25-2011
Plugging Completed: 1-25-2011

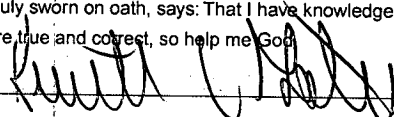
Show depth and thickness of all water, oil and gas formations.

Oil, Gas or Water Records		Casing Record (Surface, Conductor & Production)			
Formation	Content	Casing	Size	Setting Depth	Pulled Out
		surface	8 5/8"	479'	
		production	5 1/2"	4175'	2099'

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 CIBP at 3750' with 2 sacks cement. Cut casing at 2099'. Set 1st plug at 1050' with 50 sacks cement. Set 2nd plug at 540' with 50 sacks cement. 3rd plug at 40' with 20 sacks cement to surface.

Plugging Contractor License #: 5893 Name: Pratt Well Service, Inc.
Address 1: PO Box 907 Address 2: _____
City: Pratt State: KS Zip: 67124 + _____
Phone: (620) 672-9571
Name of Party Responsible for Plugging Fees: Pratt Well Service, Inc.
State of Kansas County, Pratt, ss. _____
Kenneth C. Gates
(Print Name) Employee of Operator or Operator on 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: 

Mail to: KCC - Conservation Division, 130 S. Market - Room 2078, Wichita, Kansas 67202

RECEIVED
MAR 07 2011
3-7-11
KCC WICHITA

ALLIED CEMENTING CO., LLC. 040687

REMIT TO P.O. BOX 31
RUSSELL, KANSAS 67665.

SERVICE POINT:
Medicine Lodge

DATE <i>1-25-2011</i>	SEC.	TWP.	RANGE	CALLED OUT	ON LOCATION <i>11:30 AM</i>	JOB START <i>12:00 pm</i>	JOB FINISH <i>6:15 pm</i>
LEASE <i>Paul Meyers</i>	WELL # <i>8</i>		LOCATION <i>Bellevue, KS. 1 1/2 East</i>	COUNTY <i>Edwards</i>	STATE <i>KS.</i>		
OLD OR NEW (Circle one)			<i>S/S</i>				

CONTRACTOR *Pratt Well* OWNER *Pratt Well service*

TYPE OF JOB _____

HOLE SIZE	T.D.
CASING SIZE	DEPTH
TUBING SIZE	DEPTH
DRILL PIPE	DEPTH
TOOL	DEPTH
PRES. MAX <i>400</i>	MINIMUM _____
MEAS. LINE	SHOE JOINT
CEMENT LEFT IN CSG.	
PERFS.	
DISPLACEMENT <i>Freshwater</i>	

CEMENT AMOUNT ORDERED

15 sx Gel

120 sx 60:40:4:6 gel

COMMON <i>A 72sx</i>	@ <i>15⁰⁰</i>	<i>1112⁴⁰</i>
POZMIX <i>48 sx</i>	@ <i>8⁰⁰</i>	<i>384⁰⁰</i>
GEL <i>20</i>	@ <i>20⁰⁰</i>	<i>416⁰⁰</i>
CHLORIDE	@	
ASC	@	

RECEIVED

MAR 7 2011

KCC WICHITA

HANDLING <i>140</i>	@ <i>2⁴⁰</i>	<i>336⁰⁰</i>
MILEAGE <i>140/10/30</i>		<i>420⁰⁰</i>
		TOTAL <i>2668⁴⁰</i>

EQUIPMENT

PUMP TRUCK CEMENTER *Carri Baldwin*

414-302 HELPER *Matt T*

BULK TRUCK

381-252 DRIVER *Ron G*

BULK TRUCK

_____ DRIVER _____

REMARKS:

1st plug 1055' load hole w/ 15 sx Gel Mix 50 sx Cement Disp w/ 18 Bbls water

2nd plug 500' load hole w/ fresh Mix 50 sx Cement Disp w/ 50 water.

3rd plug Mix 20 sx to surface

CHARGE TO: *Pratt Well*

STREET _____

CITY _____ STATE _____ ZIP _____

SERVICE

DEPTH OF JOB *1055*

PUMP TRUCK CHARGE *900⁰⁰*

EXTRA FOOTAGE @ _____

MILEAGE *30* @ *7⁰⁰* *210⁰⁰*

MANIFOLD @ _____

TOTAL *1110⁰⁰*

PLUG & FLOAT EQUIPMENT

_____	@ _____
_____	@ _____
_____	@ _____
_____	@ _____
_____	@ _____

TOTAL _____

To Allied Cementing Co., LLC.

You are hereby requested to rent cementing equipment and furnish cementer and helper(s) to assist owner or contractor to do work as is listed. The above work was done to satisfaction and supervision of owner agent or contractor. I have read and understand the "GENERAL TERMS AND CONDITIONS" listed on the reverse side.

SALES TAX (If Any) _____

TOTAL CHARGES *1110⁰⁰*

DISCOUNT *0⁰⁰* IF PAID IN 30 DAYS

PRINTED NAME _____

SIGNATURE *David W. Imbler*