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

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

WELL PLUGGING RECORD K.A.R. 82-3-117

OPERATOR: License #:33999				API No. 15 - 095-30023 - 00 00			
Name: Linn Operating, Inc.				Spot Description:			
Address 1: 600 Travis/Suite 5100				C.NW SW Sec. 36 Twp. 30 S. R. 7 East West			
Address 2:				2310 Feet from North / South Line of Section			
City: <u>Houston</u> State: <u>Tx</u> Zip: <u>77002</u> +				4950 Feet from X East / West Line of Section			
Contact Person: Rena Carter				Footages Calculated from Nearest Outside Section Corner:			
Phone: (405) 241-2223				☐ NE ☐ NW X SE ☐ SW			
Type of Well: (Check one) Oil Well Gas Well OG D&A Cathodic				County: Kingman			
Water Supply Well Other: SWD Permit #:				Lease Name: Russell Well #: 1			
ENHR Permit #: Gas Storage Permit #:				Date Well Completed: 9-9-65			
Is ACO-1 filed? X Yes No If not, is well log attached? Yes X No				The plugging proposal was approved on:12-13-10(Date)			
Producing Formation(s): List All (If needed attach another sheet)				by: Mr. Steve Van Geison (KCC District Agent's Name)			
Simpson Depth to Top: 3944 Bottom: 3989 TD				Plugging Commenced: 12-13-10			
Simpson Depth to Top: 4330 Bottom: 4362 T.D. Simpson Depth to Top: 4727 Bottom: 4737 T.D.				Plugging Completed: 12-16-10			
Depth to Top: 4727 Bottom: 4737 T.D.							
Show depth and thickness of	all water, oil and gas forma	itions.					
Oil, Gas or Water Records Casing				Record (Surface, Conductor & Production)			
Formation	Content	Casing	Size		Setting Depth	Pulled Out	
Simpson	Oil Gas Water	Surface	8	5/8	221	-0-	
		Production	4	1/2	4736	307	
cement. 12-16-10	it 12-14-10 PC Mix & pump 30	OOHW With rods 8 O sx. cement ins	k tub side	ing. 12 4 1/2"	2-15-10 Set from 950 to	CIBP @3900' With 2 sx 600'. Cut casing off ded steel ID plate.	
रक्षणा च गाउँक्त क	andrewskieg (Lawren) je repair (Lawren)	رادر المنافقة			eren e e	معلومته المنطوعي وليد والمستب يوليد	
Plugging Contractor License #: 8733 Name:							
Address 1: P.O. Box 389				Address 2:			
City:Enid			State: Okla Zip: 73702 +				
Phone: (590)237-61	52			_			
Name of Party Responsible for	or Plugging Fees: <u>Lin</u>	n Operating, Ir	nc	Attn: F	Rena Carter		
State of Okla County, Okla				, SS.			
Rena_Carter(Print Name)				Employee of Operator or Operator on above-described well,			
being first duly sworn on oath the same are true and coulet	, says: That I have knowled	acts statements, a	ind matte	rs herein cor	ntained, and the log of	the above-described well is as filed, and RECEIVED	
Signature:	(Toping)	~	<u> </u>			JAN 0 4 20	

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