

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 A

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

OPERATOR: License #:				API No. 15 - 158-21267-00-00			
Name: Bruce Oil Company, LLC				Spot Description:			
Address 1: 1704 Limestone Rd							
Address 2:				1,650 Feet from V North / South Line of Section			
City: McPherson State: KS Zip: 67460 + 6500							
Contact Person: Levi Koehn or Lonny Bruce				Footages Calculated from Nearest Outside Section Corner:			
Phone: (620_) 241-2938				□ NE □ NW 🗸 SE □ SW			
Type of Well: (Check one) ✔ Oil Well Gas Well GO D&A Cathodic				County: Rice			
Water Supply Well Other: SWD Permit #:				Lease Name: Swenson Well #: 1			
ENHR Permit #: Gas Storage Permit #:				Date Well Completed:			
Is ACO-1 filed? Yes V No If not, is well log attached? Yes No				The plugging proposal was approved on: (Date)			
Producing Formation(s): List All (If needed attach another sheet)				by: Jeff Klock (KCC District Agent's Name)			
Depth to Top:Bottom:T.D				Plugging Commenced: 10/10/10			
Depth to Top: Bottom: T.D				Plugging Completed: 10/14/10			
Depth to Top: Bottom: T.D							
				l			
Show depth and thickness of all water, oil and gas formations.							
Oil, Gas or Water Records		<u> </u>			ace, Conductor & Produ		
Formation	Content	Casing	Size		Setting Depth	Pulled Out	
		Surface	8.62	5	247'	200 Sacks Cement	
		Production	5.5		3520'	300 Sacks Cement	
	27.	FIGURE		7	3520'	1 State Stat	
sand at 3260', ba 1810', 1650', &14	used, state the character illed 5 sacks cer 30'; pipe came 1	of same depth placed from (bi nent on sand. Cut free at 1430'. Pulle	surfaced casi	(top) for each ce pipe on ng to 80	off 4' below gr 00' & pumped	ound. Ripped casing at 35 sacks cement & . Pulled rest of casing.	
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Plugging Contractor License #: 31925				ame: Quality Well Service, Inc.			
Address 1:190 US Hwy 56							
City: _Ellinwood	•						
Phone: (620 ) 727-3410				_	,		
Name of Party Responsible	for Plugging Fees:Bru	ce Oil Company, LL0	S	***************************************			
State of Kansas		McPherson					
Lonny Bruce					Inlovee of Operator or	Operator on above-described well,	
	. (Print Name)						
	and the second second	ledge of the facts statements,	and matte	ers herein cor	ntained, and the log of	f the above-described well is as filed, and	
the same are true and correct						RECEIVED	
Signature:	mysuce						