

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 #: 9487  
Name: WANDA SMITH  
Address 1: P.O. Box 375  
Address 2: \_\_\_\_\_  
City: SYRACUSE State: Ks Zip: 67878 + 0375  
Contact Person: WANDA SMITH  
Phone: ( 620 ) 384-5277  
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)  
CHASE Depth to Top: 2322 Bottom: 2332 T.D. \_\_\_\_\_  
\_\_\_\_\_ Depth to Top: \_\_\_\_\_ Bottom: \_\_\_\_\_ T.D. \_\_\_\_\_  
\_\_\_\_\_ Depth to Top: \_\_\_\_\_ Bottom: \_\_\_\_\_ T.D. \_\_\_\_\_

API No. 15 - 075-20164-0000  
Spot Description: \_\_\_\_\_  
- C-NE Sec. 24 Twp. 24 S. R. 41  East  West  
1370 1315 Feet from  North /  South Line of Section  
1320 1375 Feet from  East /  West Line of Section  
Footages Calculated from Nearest Outside Section Corner:  
 NE  NW  SE  SW  
County: HAMILTON  
Lease Name: JEANNETTE PLUMMER Well #: 1  
Date Well Completed: 11-14-1976  
The plugging proposal was approved on: 11-29-2010 (Date)  
by: KEN JEHLIK (KCC District Agent's Name)  
Plugging Commenced: 11-30-2010  
Plugging Completed: 11-30-2010

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
<u>CHASE 2322-32</u>	<u>Gas</u>	<u>SURFACE</u>	<u>8 5/8</u>	<u>380</u>	<u>0</u>
		<u>PRODUCTION</u>	<u>4 1/2</u>	<u>2399</u>	<u>0</u>

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.

50 SX CMT FROM 2332' to 1530'  
SPACER FROM 1530' to 900'  
50 SX CMT FROM 900' to 0' to 500#  
10 SX Down the 4 1/2 x 8 5/8 ANNULUS TO 300#  
USED 60/40 POE 4% GEL

RECEIVED  
DEC 09 2010  
12-6-10  
KCC WICHITA

Plugging Contractor License #: 99996 Name: ALLIED CEMENTING Co., LLC.  
Address 1: P.O. Box 27 Address 2: \_\_\_\_\_  
City: OAKLEY State: KANSAS Zip: 67748 +  
Phone: ( ) \_\_\_\_\_

Name of Party Responsible for Plugging Fees: WANDA SMITH  
State of KANSAS County, HAMILTON, ss.  
WANDA SMITH (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: Wanda Smith