**Notice:** Fill out COMPLETELY and return to Conservation Division at the address below within 60 days from plugging date.



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 #: 33937				API No. 15 - 051-26,027-00-00											
Name: Meridian Energy, Inc.				Spot Description:											
Address 1:1475 North Ward Circle  Address 2:  City: State: State: Zip: 80116 +  Contact Person: Neal LaFon															
								Phone: (303_) 688-40					✓ NE NW	SE SW	
									-	☐ OG ✓ D&A ☐ Cath	hodic	County: _	Ellis		
								Water Supply Well				Lease Na	me: Triumph Tr	ust well #: 1	
ENHR Permit #: Gas Storage Permit #:				Date Well Completed: 10/25/2010											
Is ACO-1 filed?   ✓ Yes	No If not, is	well log attached? Yes	No			proved on: 10/24/2010									
Producing Formation(s): List	•	·		'		(KCC Distric	ct Agent's Name)								
None         Depth to Top:         Bottom:         T.D.				Plugging Commenced: 7.43AH 10/25/2010  Plugging Completed: 11:30AM 10/25/2010											
Depth to Top: Bottom: T.D															
Depth	to Top: E	Bottom:T.D													
Show depth and thickness of	fall water, oil and gas f	ormations.				·									
Oil, Gas or Water Records				sing Record (Surface, Conductor & Production)											
Formation	Content	Casing	Size		Setting Depth	Pulled Out									
		Surface Pipe		<b>.</b>	220.52	None									
		Outlace Lipe	8 5/8	•	220.02	, None									
	- Harman da di di di sa mata di														
,															
(1st Plug @ 3775 275'W/40sks)(5th	'W/25sks)(2nd Plug @ 40'W/ N/1/4#CF/sk E	er of same depth placed from Plug @ 1475'W/25 (10sks)(30sks In Ra By Allied- Complete with MUD)	5sks)(3 at Hole)	rd Plug ( )(15sks I	@ 700'W/100 In Mouse Hole	e)(Total 245sks st Plug 15 Minute									
						ſ	JEC O C CO								
<b>D</b>	" 31548		<b>K</b> 1	Discov	ery Drilling Co	Inc.	-c u y 201								
Plugging Contractor License #: 31548  Address 1: P.O. Box 763						KC	DEC 0 9 201 C WICHIT								
					ansas		+ ^								
				State: _IX	alisas	Σιρ. <u>Ο 7 Ο Ο 3</u>									
Phone: (785 ) 623-2			<u></u>				V								
Name of Party Responsible	for Plugging Fees: <u>M</u>	leridian Energy, Inc.													
State of	Cou														
NEHU LATOR	(Print Nan	101		Em	nployee of Operator o	r Operator on above	-described well,								
being first duly sworn on oat	h, says: That I have kno	owledge of the facts statement	ts, and matt	ers herein co	entained, and the log o	of the above-described we	ll is as filed, and								
Signature: Meal le	Fr. Presi	dent													