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

OPERATOR: License #: 3067

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

API No. 15 -095-00740-00 00

Name: Molitor Oil, Inc.				Spot Description:			
Address 1: 9517 S.W. 80 Ave				SE_SE_SE Sec. 30_ Twp. 29_ S. R. 8 East			
Address 2:				Feet from North / 📈 South Line of Section			
City: Spivey state: KS Zip: 67142 +							
Contact Person:Mark_Molitor				Footages Calculated from Nearest Outside Section Corner:			
Phone: (620_) _243-6773				NE NW VSE SW			
Type of Well: (Check one) Oil Well Gas Well OG D&A Cathodic				County: Kingman			
Water Supply Well Other: SWD Permit #:				Lease Name: Shepard C Well #: 1			
ENHR Permit #: Gas Storage Permit #:				Date Well Completed: 1961			
Is ACO-1 filed? Yes V No If not, is well log attached? Yes V No				The plugg	ing proposal was appr	roved on: 8/4/10 (Date)	
Producing Formation(s): List All (if needed attach enother sheet)				_{by:} Jet	f Klock	(KCC District Agent's Name)	
Depth to Top: Bottom: T.D				Plugging (Plugging Commenced: 9/8/10		
Depth to Top: Bottom: T.D				Plugging Completed: 9/10/10			
Depth to Top: Bottom: T.D							
Show depth and thickness of	all water, oil and gas fo	ormations.					
Oil, Gas or Wate		Casing F		Record (Surface, Conductor & Production)			
Formation	Content	Casing	Size		Setting Depth	Pulled Out	
		Surface	5 5/8	π	255	200 sacks cement	
		:	4.4408		4545	105	
		Production	4 1/2"		4215	125 sacks cement	
			<u> </u>				
					1	1	
sacks cement on to 1150' & pumpe 100# hulls. Pulled	sand. Ripped d 35 sacks cen d to 310' & pum	casing at 1425', 135 nent, 3%cc & 100# l	0' & 1: nulls.	290', pip Pulled to	e came free a o 700' & pump	and at 3785' & bailed 4 at 1290'. Pulled casing ped 35 sacks cement & casing & topped off	
with 10 sacks cen	nent.					v	
		RECEIVED				₽	
Plugging Contractor License	#: <u>31925</u>	OCT 0 4 2010	Name: .	Quality	Well Service, I	nc.	
Address 1: 190 US 56	Highway		Address	2:			
City: _Ellinwood	<u>.</u>	KCC WICHITA		State: KS	S	z _{ip:} <u>67526</u> +	
Phone: (620_) 727-3	410			_			
Name of Party Responsible f	or Plugging Fees: MC	olitor Oil. Inc.	_				
V and a	_						
state of <u>Name</u> Tane t	<u> </u>	tor	an		ployee of Operator or	Operator on above-described well,	
being first duly sworn on oath	(Print Name s, says: That I have know	•	and matte			the above-described well is as filed, and	
the same are true and correc	t, so help me God.	<i>A 1</i>					
Signature:	net Mo	litor					
/	Mail to: KCC - C	Conservation Division, 130 S	. Market	- Room 207	8. Wichita, Kansas	67202	