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

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

OPERATOR: License #: 5	135			API No. 15	. <u>147-20,634</u>	-00-00	
Name:John O. Farmer, Inc.							
Address 1: 370 West Wichita Avenue							
Address 2: P.O. Box 352				1,430 Feet from North / South Line of Section			
City: Russell State: KS Zip: 67665 + 0 3 5				. 620 Feet from East / West Line of Section			
Contact Person: Marge Schulte				Footages Calculated from Nearest Outside Section Corner:			
Phone: (785_) 483-3144, Ext. 214				NE NW SE ✓SW			
Type of Well: (Check one) Oil Well Gas Well OG V D&A Cathodic				County: Phillips			
Water Supply Well Other: SWD Permit #:				Lease Name: Hoch Well #: 1			
ENHR Permit #: Gas Storage Permit #:				Date Well Completed:11/29/2010			
Is ACO-1 filed? Yes No If not, is well log attached? Yes				The plugging proposal was approved on: 11/28/2010 (Date)			
Producing Formation(s): List All (II needed attach another sheet)				by: Case Morris (KCC District Agent's Name)			
None							
Depth to Top: Bottom: T.D				- Plugging Completed: 6:30AM 11/29/2010			
Depth to Top: Bottom:T.D				Flagging Completed.			
Show depth and thickness of a		itions.					
	Oil, Gas or Water Records			Record (Surfa	ce, Conductor & Production)		
Formation	Content	Casing	Size		Setting Depth	Pulled Out	
		Surface Pipe	8 5/8	"	222.29	None	
			 				
}							
(1st Plug @ 3515'V 275'W/40sks)(5th F 60/40Poz 4%GelW Circulated 1st Plug	ed, state the character of N/25sks)(2nd Pli Plug @ 40'W/10: I/1/4#CF/sk By 0	same depth placed from (bot ug @ 1525'W/25sl sks)(30sks In Rat l Quality Oilwell Cen	tom), to (ks)(3r Hole)(nentin	top) for each d Plug ((15sks li g)(Com	o plug set. 925'W/100: n Mouse Hole pleted @ 6:30	e)(Total 245sks	
Plugging Contractor License #: 31548			Name: _	Discov	ery Drilling Co.	RECEIVED	
Address 1: P.O. Box 763			Address	2:		KCC WICHITA	
City: Hays				State: <u>K</u> a	ansas	zip: <u>67601</u> +	
Phone: (785) 623-29	920			_		<	
Name of Party Responsible for	r Plugging Fees: _ John	O. Farmer, Inc.				 	
State of Kansas	County, _	Russell		, SS.			
	•	III., Presiden			ployee of Operator or	Operator on above-described well,	
being first duly sworn on oath,	says: That I have knowled			rs herein con	stained, and the log o	f the above-described well is as filed, and	
the same are true and correct, Signature:	so nelp me God.					1-24-11	
					,,,		