

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
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

OPERATOR: License #: 3273
Name: Herman Loeb LLC
Address 1: P.O. Box 838
Address 2: _____
City: Lawrenceville State: IL Zip: 62439 + _____
Contact Person: Alan Vratil
Phone: (620) 886-2419
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)
_____ Depth to Top: 4564 Bottom: 4612 T.D. 4612
_____ Depth to Top: _____ Bottom: _____ T.D. _____
_____ Depth to Top: _____ Bottom: _____ T.D. _____

API No. 15 - 007-01208-0000
Spot Description: _____
SW NE Sec. 16 Twp. 33 S. R. 11 ☐ East ☒ West
2,285 2949 Feet from ☐ North / ☒ South Line of Section
2,285 2338 Feet from ☒ East / ☐ West Line of Section
Footages Calculated from Nearest Outside Section Corner:
☐ NE ☐ NW ☒ SE ☐ SW
County: Barber
Lease Name: Page C Well #: 6
Date Well Completed: _____
The plugging proposal was approved on: 12/28/2010 (Date)
by: Steve Durant (KCC District Agent's Name)
Plugging Commenced: 01/04/2011
Plugging Completed: 01/06/2011

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
		Surface	12 1/2	202	None
		Production	7 "	4512	None

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.

Spot 7sx cement on bridge plug with dump bailer at 4400', perforate at 690'
1/5 - run tubing to 690', circulate cement to surface up 7", shut valves, continue to pump cement up surface pipe from 690', lost circulation, total of 180sx 60/40 POZ 4% gel in production, 240sx cement behind production
1/6 - tag up with cement at 305', perforate production at 230', run tubing to 230', circulate 90sx 60/40 POZ 4% gel up production, shut valves, continue to pump up surface, circulate 150sx cement up surface

Plugging Contractor License #: 5105 Name: Clarke Corporation
Address 1: P.O. Box 187 Address 2: 107 W. Fowler
City: Medicine Lodge State: Kansas Zip: 67104 + _____
Phone: (620) 886-5665
Name of Party Responsible for Plugging Fees: Herman Loeb LLC
State of Kansas County: Barber, ss.
Mark Morgenstern ☒ Employee of Operator or ☐ Operator on above-described well.
(Print Name)

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: Mark Morgenstern