

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 #: 5474
Name: Northern Lights Oil Co., L.C.
Address 1: P.O. Box 164
Address 2: _____
City: Andover State: KS Zip: 67002 + _____
Contact Person: Robert Sutherland
Phone: (316) 305-0493
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: _____ Bottom: _____ T.D. _____
_____ Depth to Top: _____ Bottom: _____ T.D. _____
_____ Depth to Top: _____ Bottom: _____ T.D. _____

API No. 15 - 137-20529 00 00
Spot Description: 1800 South, 330 West, from NE corner
S2 NE SE NE Sec. 36 Twp. 5 S. R. 24 East West
1,800 Feet from North / South Line of Section
330 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Norton
Lease Name: Judy Well #: 1
Date Well Completed: 10/10/10
The plugging proposal was approved on: 10/10/10 (Date)
by: Bruce Rodie (KCC District Agent's Name)
Plugging Commenced: 10/10/10
Plugging Completed: 10/11/10

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	8 5/8"	218'	0

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.

25sx@2000, 100sx@1155, 40sx@270, 10sx@40, 30sx@Rat Hole, 15sx@Mouse Hole; 220sx Total
60/40, 4% gel, 1/4# floseal

RECEIVED
DEC 16 2010
KCC WICHITA

Plugging Contractor License #: 4958 Name: Mallard JV, Inc.
Address 1: P.O. Box 1009 Address 2: _____
City: McPherson State: KS Zip: 67460 + _____
Phone: (620) 241-4640
Name of Party Responsible for Plugging Fees: Northern Lights Oil Co.
State of Kansas County, Butler, ss.
John W. Sutherland Jr. 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: [Signature]