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

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 #: 6768	API No. 15	. <u>009-22593-0</u>	00-01	
Name: Carrie Exporation & Development, LLC		Spot Description: NE SW SW SE		
Address 1: 210 W, 22nd, Street	l l		rp. 19 S. R. 11 East West	
Address 2:		Feet from North / 🗸 South Line of Section		
City: Hays State: KS Zip: 67601 +				
Contact Person: Ron Herold	Footages Calculated from Nearest Outside Section Corner:			
Phone: (785) 625-9318		NE NW SE SW		
Type of Well: (Check one)		County: Barton		
Water Supply Well Other: SWD Permit #:		Lease Name: Neeland B well #: 4		
ENHR Permit #: Gas Storage Permit #:		Date Well Completed:		
Is ACO-1 filed? Yes No If not, is well log attached? Yes	No The plugg	The plugging proposal was approved on:(Date)		
Producing Formation(s): List All (If needed attach another sheet)	by: Bru	by: Bruce Rodie (KCC District Agent's Name)		
Depth to Top: Bottom: T.D	— Plygging C	Plugging Commenced: 12-13-10		
Depth to Top: Bottom: T.D		Plugging Completed: 12-13-10		
Depth to Top: P.D				
Chandrath and Abbeller and all the best and a second and				
Show depth and thickness of all water, oil and gas formations.				
	,	Record (Surface, Conductor & Production)		
Formation Content Casing	Size	Setting Depth	Pulled Out	
	8-5/8"	223	None	
	5-1/2"	3315	None	
	3-1/2	33.13	None	
Describe in detail the manner in which the well is plugged, indicating where the mud- cement or other plugs were used, state the character of same depth placed from (botte Perforated casing @1500', 475' & 200'. Ran tubing to 50 sacks cement, pulled tubing up to 1500', pumped 2 700' and circulated 190 sacks cement up casing and s Plugging Complete.	om), to (top) for each o 3000', pump 200# hulls an	plug set. Ded 11 sacks g d 100 sacks ce	jel with 200# hulls and ement, pulled up to	
Plugging Contractor License #:31529	Name: Mike's	Testing & Salva	ge, Inc.	
Address 1: P.O. Box 467	Address 2:			
City: Chase	State: Ka	nsas	- ·	
Phone: (620) 938-2943			RECEIVED <	
Name of Party Responsible for Plugging Fees: <u>Carrie Exploration & Deve</u>	lopment		DEC-3 0-2010	
State of Kansas County, Rice	, ss.		VCC IANO	
Mike Kelso (Print Name)	Emi	ployee of Operator or	Operator on above described well,	
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:			······································	