

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 #: 34392
Name: TexKan Exploration, LLC
Address 1: P.O. Box 191643
Address 2: _____
City: Dallas State: TX Zip: 75219 + _____
Contact Person: Bill Robinson
Phone: (785) 216-0064
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 - 137-20555 00-00
Spot Description: _____
C nw ne ne Sec. 36 Twp. 5 S. R. 21 East West
330 Feet from North / South Line of Section
990 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Norton
Lease Name: Spratlen Well #: 1
Date Well Completed: p/a'd
The plugging proposal was approved on: 5-17-11 (Date)
by: Pat Staab (KCC District Agent's Name)
Plugging Commenced: 6-1-11
Plugging Completed: 6-1-11

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
Reagan	water	17	5 1/2	3698	none
		23	8 5/8	222	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.

Tied on to 5 1/2 casing mixed 50 sks with 200# hulls, mixed 14 gel and tailed in with 150 sks, squeezed to 500 psi and shut in. Cut 5 1/2 casing and capped 5' below surface.

RECEIVED

JUN 03 2011

KCC WICHITA

Plugging Contractor License #: 99996 Name: Allied Cementing Co., Inc.
Address 1: P.O. Box 31 Address 2: _____
City: Russell State: KS Zip: 67665 + _____
Phone: (785) 483-2627

Name of Party Responsible for Plugging Fees: TexKan Exploration, LLC
State of Kansas County, Rooks, ss.
TexKan Exploration, LLC 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: B. Robinson

