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 #: 5225		API No. 15 - 057-20649-00-00							
Name: Quinque Operating Company		Spot Description:							
Address 1: 908 N.W. 71st St.			NE SW.	<u>₩ Sec.28_</u> Tv	vp. 29 S. R. 22 East √ West				
Address 2:									
City: Oklahoma City State: OK	· · · · · · · · · · · · · · · · · · ·								
Contact Person: Catherine Smith	antina de la companya		Footages Calculated from Nearest Outside Section Corner:						
Phone: (405) 840-9876 ext. 129				NE ✓ NW	SE SW				
Type of Well: (Check one) Oil Well Gas Well			County:	Ford					
Water Supply Well Other:			Lease Nan	ne: Cuerr Trust					
ENHR Permit #: Gas Sto		Date Well Completed: (Date) The plugging proposal was approved on: (Date)							
Is ACO-1 filed? ✓ Yes No If not, is well		J No ∣							
Producing Formation(s): List All (If needed attach another			_{by:} Ken	Jehlick	(KCC District Agent's Name)				
Depth to Top: Botto Botto			Plugging Commenced: 11/29/09						
Depth to Top: Botto			Plugging Completed: 11/30/09						
Deptil to top Boild	·····								
Show depth and thickness of all water, oil and gas formation	ations.								
Oil, Gas or Water Records		Casing Record (Surface, Conductor & F			oduction)				
Formation Content	Casing	Size		Setting Depth	Pulled Out				
	Surface	8 5/8	r	550'	0				
AND SERVICE AND ADDRESS OF THE SERVICE AND ADDRE									
Describe in detail the manner in which the well is plugg cement or other plugs were used, state the character of 1st Plug: 1400' w/50 sx cement thr 2nd Plug: 600' w/50 sx	same depth placed from (bot				ds used in introducing it into the hole. If RECEIVED				
3rd Plug: 360' w/50 sx 60' w/20 sx; Rat hole w/30 sx; Mou	ıse hole w/20 sx		JAN 1 1 2						
					KCC WICHITA				
Plugging Contractor License #: 5929		Name: .	Duke D	rilling Co., Inc.					
	- Maritime and the second seco								
					zip: <u>67530</u> +				
Phone: (620) 793-8366			•						
Name of Party Responsible for Plugging Fees: Quin	que Operating Com	nanv							
					- Anni-				
State of Oklahoma County,	Okianoma		, ss.						
Catherine Smith (Print Name)	-		🖌 Em	ployee of Operator or	Operator on above-described well,				
being first duly sworn on oath, says: That I have knowle	dge of the facts statements, a	ind matte	ers herein cor	ntained, and the log of	the above-described well is as filed, and				
the same are true and correct, so help me Got									
Signature: atheung Smith	Ú								

B ener	4	S T	es i p		CEM	ألامة	1	·		TRE	ATMEN	IT R	PORT	
Customer	Infinat	on En					Date 11-29-09							
Lease (Jerr	TRUST	77 v	/ell #	ī					11-21	07			
Field Order			'		11	g D. P.	Depth	1480'	County	FORL)	Stat	°./.5	
Type Job	TA	24	7			F	ormation			Legal	Description	27-2	A-ZZ	
PIPE DATA PERFORATIN			ORATING	DATA	FLUID USED				TREATMENT RESUME					
Casing Size	Tubing Si	ze Shots/F	ì		Acid 771	46	YOP	07 4	魁則	PRESS 90	ISIP			
Depth	Depth	Fron	142 To	50 ₀₃ y	Pre Pad	ince	1	Max	~/	<i></i>	5 Min.			
Volume :	· Volume	From	4-1.8-	50 ₅₁	Pad 7.5	gal/s		Min "		*	10 Min.			
Max Press	Max Pres		-	5Dax	Frac /3	5 16/a	na)	Avg	一寸	-	15 Min.			
Well Connect	on Annulus			70 sr	T	- 17/3	·	HHP Used	-		Annulus	Pressu	ire	
Plug Dopth	Packer D		1-Mouse	50 x	Flush Man	a H	20	Gas Volur	ne		Total Lo	ed		
Customer Re	presentative	Roger	e Alson		Manager -	OYIV	Ben	ne#	Trea	ter GARI	ey Ho	m Oh	iies	
Service Units	19898		27462		1980	4 19	883	,			<u> </u>			
Drivor Names	Garry		Abela		Chad		υZ		1					
Time	Casing Prossure	Tubing Pressure	Bbls. Pun	ped	Rate					Service Log				
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