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

WELL PLUGGING RECORD

K.A.R. 82-3-117

IS-165-20770-00-00

Form must be Signed All blanks must be Filled

OPERATOR: License #: 8507				API No. 16	- <u>165-19-00</u>	7-00-00	مدر	
Name: Paxco, Inc.				Spot Description: W/2 NW NW				
Address 1: 8920 P	eppertree Circle			RE WW V	/W_NW _{ec. 12}	Twp. 16 S. R	East West	
Address 2:				4.944	Feet from	n North /	South Line of Section	
City: Wichita State: Ks. Zip: 67226 +				4,657 / Feet from 📝 East / 🗌 West Line of Section				
Contact Person: Jay Clark				Footages Calculated from Nearest Outside Section Corner:				
Phone: (316) 634-1714					□ NE □ NW □ SE □ SW			
Type of Well: (Check one) Oil Well Gas Well GO D&A Cathodic								
Water Supply Well Other: SWD Permit #:				<i>{</i>			Well #: _3	
ENHR Permit #: Gas Storage Permit #:							77011 77. 250	
Is ACO-1 filed? Yes No If not, is well log attached? Yes No					g proposal was ap	proved on:	(Date)	
Producing Formation(s): L	by: Richard Lacey (KCC District Agent's Name)							
Depth to Top: Bottom: T.D				- Plugging Commonand: 2-23-10				
Depth to Top: Bottom: T.D				Plugging Completed: 2-24-10				
Depth to Top: § D								
Chaus doubt and shiptons and	-6-10 -0 10		· · ·					
Show depth and thickness		s formations.						
Oll, Gas or W.	Content	01	——————————————————————————————————————	ng Record (Surface, Conductor & Produc				
Tomasor	Content	Casing	Size		Setting Depth	Pulled Out		
			8-5/8	n	1170'	None		
			4-1/2	,	3558'	2205		
				·				
Plugged off botto 1220', pumped 1	om with sand to 5 sacks gel ar	s plugged, indicating where the oter of same depth placed from o 3050' and 4 sacks nd 50 sacks cement ks cement to surfac	s cement t pulled	top) for each p t. Cut cas up to 500	sing loose @ 3', pumped 4)2205', pu 10 sacks c	lled up to ement, pulled	
Plugging Contractor License #:31529 Na								
Address 1: _P.O. Box 467				Address 2:				
				State: Kansas zlp: 67524 + 0467				
Phone: (620) 938-	2943			<u>-</u>				
		Mike's Testing & Salva						
State of Kansas	Co	_{unty,} Rice		_ , SS.				
Mike Kelso	(Print Na	me)		_ Emplo	yee of Operator or	Operator o	on above-described well,	
peing first duly sworn on oa	ith, says: That I have kr	nowledge of the facts statemen	ts, and matter	s herein contai	ned, and the log of	the above-descr	ribed well is as filed, and	
he same are true and corre	ect, so help me God.						RECEIVED	
Signature:	11/12	The					VEOFIAED.	
	-							