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 #: 3911			API No. 15 - 185-21786-00-00		
Name: Rama Operating Co., Inc.			Spot Description: SW SE NW NE		
Address 1: P.O. Box 159		_	Sec. <u>10</u> 7	wp. 24 S. R. 13 East West	
Address 2:			4.249 Feet from North / V South Line of Section		
City: Stafford State: Ks. Zip: 67578 +			Feet from East / West Line of Section		
Contact Person: Robin Austin  Phone: (620 ) 234-5191  Type of Well: (Check one) Oil Well Gas Well OG D&A Cathodic			Footages Calculated from Nearest Outside Section Corner:  NE NW SE SW		
Water Supply Well			Lease Name: _Spare Well #: _2-10		
	ell log attached? Yes				
Producing Formation(s): List All (If needed attach another	<del>-</del> -	· I ''		roved on: (Date)	
	tom: T.D			(KCC District Agent's Name)	
Depth to Top: Bottom: T.D			Plugging Commenced: 6-16-10  Plugging Completed: 6-18-10		
Depth to Top: Bott	iom:T.D	Pi	ugging Completed: <del>0+18-</del>	10	
Show depth and thickness of all water, oil and gas forn	nations.				
Oil, Gas or Water Records	,	Casing Reco	rd (Surface, Conductor & Produ	iction)	
Formation Content	Casing	Size	Setting Depth	Pulled Out	
		8-5/8"	768'	None	
		5-1/2"	3900	1800	
	<del></del>	<u>5-1/2</u>	3890'	1800'	
Plugged off bottom with sand to 34 pumped 15 sacks gel and 50 sack 40' and circulated 20 sacks cemer	400' and 5 sacks ce	ment. ( to 350'	Cut casing loose @ , pumped 50 sacks	s cement, pulled up to	
	,*				
Plugging Contractor License #: 31529		Name:N	like's Testing & Salva	age, Inc.	
Address 1: P.O. Box 467		Address 2: _	<u></u>		
	· · · · · · · · · · · · · · · · · · ·				
Phone: (620 ) 938-2943					
Name of Party Responsible for Plugging Fees: Ran	na Operating Co., Inc.				
State of Kansas County,					
Mika Kalas		·	_	[	
(Print Name)		i	Employee of Operator or	Operator on above-described well,	
being first duly sworn on oath, says: That I have knowle		d matters he	rein contained, and the log of	the above-described well is as filed, and	
the same are true and correct, so help me God.	lela			RECEIVED	
Signature:				KANSAS CORPORATION COMMISSION	

Mail to: KCC - Conservation Division, 130 S. Market - Room 2078, Wichita, Kansas 67202

JUN 28 2010