

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 #: 31522
Name: GERALD MICHAELIS OIL
Address 1: 979 NW 29TH RD
Address 2: _____
City: RUSSELL State: KS Zip: 67665 + _____
Contact Person: GERALD MICHAELIS
Phone: (785) 935-3152
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)
N/A Depth to Top: _____ Bottom: _____ T.D. _____
_____ Depth to Top: _____ Bottom: _____ T.D. _____
_____ Depth to Top: _____ Bottom: _____ T.D. _____

API No. 15 - 167-02143-00-00
Spot Description: NW-SW-NE
_____ Sec. 29 Twp. 14 S. R. 12 East West
3,730 Feet from North / South Line of Section
2,310 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: RUSSELL
Lease Name: HEIM Well #: 2
Date Well Completed: 1-16-1952
The plugging proposal was approved on: 5-7-2010 (Date)
by: _____ (KCC District Agent's Name)
Plugging Commenced: 5-10-2010
Plugging Completed: 5-10-2010

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
			85/8	206	
			5.5	3172	
					RECEIVED
					MAY 21 2010
					KCC WICHITA

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.

RAN TUBING TO 2150 SPOT 75 SK 200# HULLS PULLED TO 1400 SPOT 100 SKS 200# HULLS PULLED TO 400 CIR W/C 20 SK 1 HULL PULLED TUBING TOP OFF W/C 5 SK 85/8 PRESSERED UP TO 400 PSI

*Perfs: 2 Shots 1375.
2 Shots 600 -
2 Shots 300 -*

Plugging Contractor License #: 32528 Name: DAVID FUNK
Address 1: 331 N BROOKS Address 2: _____
City: RUSSELL State: KS Zip: 67665 + _____
Phone: (785) 324-1041
Name of Party Responsible for Plugging Fees: GERALD MICHAELIS OIL
State of Kansas County, Russell, ss. _____
Gerald Michaelis Oil 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: Gerald Michaelis