

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 #: 31514  
Name: Thoroughbred Associates, LLC  
Address 1: 8100 E. 22nd St. No.  
Address 2: Bldg. 600, Suite F  
City: Wichita State: KS Zip: 67226 + \_\_\_\_\_  
Contact Person: Robert C. Patton, Managing Partner  
Phone: ( 316 ) 685-1512  
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 - 191-22586-00-00  
Spot Description: \_\_\_\_\_  
SW NW, NE Sec. 14 Twp. 30 S. R. 2  East  West  
990 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: Sumner  
Lease Name: Sparr Well #: 1  
Date Well Completed: 11/06/10  
The plugging proposal was approved on: 11/05/10 (Date)  
by: Dan Fox (KCC District Agent's Name)  
Plugging Commenced: 11/06/10  
Plugging Completed: 11/06/10

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

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.

RECEIVED  
MAY 31 2011  
KCC WICHITA

Plugging Contractor License #: \_\_\_\_\_ Name: Basic Energy Services  
Address 1: Post Office Box 8613 Address 2: \_\_\_\_\_  
City: Pratt State: KS Zip: 67124 + \_\_\_\_\_  
Phone: ( 620 ) 672-1201  
Name of Party Responsible for Plugging Fees: Thoroughbred Associates, LLC  
State of Kansas County, Sedgwick, ss.  
Karri Knox Wolken  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: Karri Knox Wolken