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 #:310000				API No. 15 . 097-21088 DO. DO											
Name: Prater Oil & Gas Operations				Spot Description:											
Address 1:1303 N. Main. Address 2:				\$\frac{\sigma}{2} \cdot \frac{\sigma}{2} \sigma \frac{\sigma}{2} \frack{\sigma}{2} \frac{\sigma}{2} \frac{\sigma}{2} \frac{\sigma}{2} \											
				330	Feet from	North / South Line of Section									
				Footages Calculated from Nearest Outside Section Corner: NE NW SE SW ic County: Kiowa Lease Name: ffankhouser Well #: 1 Date Well Completed: 1/16/1988 The plugging proposal was approved on: 5/31/2011 (Date) by: Eric MacLaren (KCC District Agent's Name) Plugging Commenced: 5/31/2011											
								Depth to Top: 4717 Bottom: 4719 T.D.							
								Depth to Top: <u>4726</u> Bottom: <u>4730</u> T.D.							
								Depth to Top: 4746 Bottom: 5000 T.D.				Prugging Completed: O.C. Co. 11			
									4708	4816					
								Show depth and thickness of	all water, oil and gas forr	nations.					
												sing Record (Surface, Conductor & Production)			
Formation	Content	Casing	Size					Setting Depth	Pulled Out						
		Surface	8 5/8						427	None					
		Production	5 1/2		4998	2200									
		- 1 TOGGGETON	3 1/2		4330	2200									
			 		l										
Set CIBP at 4575', 1140', pump 15sx 20sx cement to su	sed, state the character of , spot 2sx ceme gel, 50sx 60/40 rface	of same depth placed from (bot nt on bridge plug w	ith dur nt, 2nd	op) for each np baile 1 460', 5	er, lay down o	casing, run tubing to 1st OZ, 3rd 60', circulate									
	•	•				RECEIVED									
						JUN 1 0 2011									
Plugging Contractor License #: 5105			Name: _	Clarke	Corporation	KCC WICHITA									
Address 1: _P.O. Box 187			Address 2	111011117											
City: Medicine Lodge				State: KS	S	zip: <u>67104</u> +									
Phone: $(620) = 886-56$	365														
	r Plugging Fees: Prat	ter Oil & Gas Operatio	ons												
State of Kansas County, Barber				_ , SS.											
Mark Morgenstern (Print Name)				Employee of Operator or Operator on above-described well.											
being first duly sworn on oath, the same are true and correct	says: That I have knowle					the above-described well is as filed, and									
Signature:	mark	morgenster				_									