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 #: CARRO 33259					API No. 15 - 071-20763 · 00 · 00			
Name: Arrow Oil & Gas Inc.				Spot Description:				
Address 1: P.O. Box 862				<u>W/2 _NE_ NE_ SW</u> Sec. 23 Twp. 16 S. R. 42 East ✓ West				
Address 2:				2,300 Feet from North / South Line of Section				
City: Norman State: Ok. Zip: 73070 +					2,150 Feet from East / West Line of Section			
•	_	· · · · · · · · · · · · · · · · · · ·		Footages Calculated from Nearest Outside Section Corner:				
Phone: (405) 364-				□ NE □ NW □ SE ✓ SW County: GREELEY Lease Name: Hibbert-Carnes				
		OG D&A Cathod	1					
Water Supply Well			1					
ENHR Permit #: Gas Storage Permit #: Is ACO-1 filed? Yes No If not, is well log attached? Yes No					Date Well Completed: 4-9-2004			
Producing Formation(s): L			ן און	The plugging proposal was approved on: 3-25-2011 (Date)				
Dep		Bottom: 4975' T.D. 5178'		by: Ken Jelnyk (KCC District Agent's Name)				
Dep	•	Bottom: T.D		Plugging Commenced: 8-16-2011				
	•	Bottom:T.D		Plugging Completed: 8-16-2011				
	•							
Show depth and thickness	of all water, oil and gas	formations.						
Oil, Gas or W	ater Records		Casing I	sing Record (Surface, Conductor & Production)				
Formation	Content	Casing	Size		Setting Depth	Pulled Out		
1			8 5/8		356	0		
			5 1/2		5172	0		
			Alt 🎞		Perf. c/o 2756 &	1520 & cmtd to 0'		
						w/1075 sx		
cement or other plugs we	re used, state the charact O' w/2 sx, 25 sx 2000' 2000' to 1440' 400'	cter of same depth placed from (bo	ttom), to			RECEIVED SEP 0 6 2011 KCC WICHIT		
	00006			Alliad (Comontina Co. 1			
Plugging Contractor License #:				Name: Allied Cementing Co. LLC.				
Address 1: P.O. Box 31				_ Address 2:				
City: _Russell				_ State: K	S	z _{ip} : 67665 + 0031		
Phone: (785) 483	3=2627			-				
Name of Party Responsib	le for Plugging Fees:	Arrow Oil & Gas Inc.						
State of Oklahoma	Cou	unty,		, ss.				
Harold -	Tracy Holli	`S		_ 🛂 Em	ployee of Operator or	Operator on above-described well,		
being first duly sworn on on the same are true and con	oath, says: That I have kr rrect/so help me God.					the above-described well is as filed, and		
Signature:	word na	my pour						

Address:	iress: PO Box 792		City:Cheyenne Wells		Zip + 4 80810
Phone:	(719) 340-8987	•			
Plugging (Contractor:				
License #:	34069	Name:	Basic Energy Sarv	ices, Lit	
Address 1:	500 W/ ELDNOIS, STE 600		PO 80% 16460		
City:	MEA AND			State: 73	Zip + 4:75702
Phone:	(439) 600-5303				
Proposed I	Date of Plugging (if known): 92011 9-1-2011				

CERTIFICATION OF COMPLIANCE WITH THE KANSAS SURFACE OWNER NOTIFICATION ACT

Operator Infor	mation:						
Contact person:	Shane Pelton						
Contact phone:	(719) 340-8987					
Contact fax:	()					
Contact email:							
Surface Owner	Inform	ation:					
Name:	Gordo	n Unruh					
Address:	112	984 m. St.					
Address:							
City:	G	wensburg.					
State:	KS						
Zip +4:	اً م	10 54					

If this form is being submitted with a Form C-1 (Intent) or CB-1 (Cathodic Protection Borehole Intent), you must supply the surface owners and the KCC with a plat showing the predicted locations of lease roads, tank batteries, pipelines, and electrical lines. The locations shown on the plat are preliminary non-binding estimates. The locations may be entered on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.

Select one of the following:

- I certify that, pursuant to the Kansas Surface Owner Notice Act (House Bill 2032), I have provided the following to the surface owner(s) of the land upon which the subject well is or will be located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form CP-1 that I am filing in connection with this form; 2) if the form being filed is a Form C-1 or Form CB-1, the plat(s) required by this form; and 3) my operator name, address, phone number, fax, and email address.
- I have not provided this information to the surface owner(s). I acknowledge that, because I have not provided this information, the KCC will be required to send this information to the surface owner(s). To mitigate the additional cost of the KCC performing this task, I acknowledge that I am being charged a \$30.00 handling fee, payable to the KCC, which is enclosed with this form.

if choosing the second option, submit payment of the \$30.00 handling fee with this form. If the fee is not received with this form, the ESONA-1 form and the associated Form C-1, Form CB-1, Form T-1, or Form CP-1 will be returned.

RECEIVED
SEP 0 6 2011
KCC WICHITA