

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 #: 32278
Name: Tengasco, Inc.
Address 1: PO Box 458
Address 2: 1327 Moose Rd.
City: Hays State: KS Zip: 67601 + 9744
Contact Person: Gary Wagner
Phone: (785) 625-6374
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)
Arbuckle Depth to Top: 3589 Bottom: 3612 T.D. 3612
_____ Depth to Top: _____ Bottom: _____ T.D. _____
_____ Depth to Top: _____ Bottom: _____ T.D. _____

API No. 15 - 163-21,041 · 00 · 00
Spot Description: _____
NW SE NW Sec. 21 Twp. 9 S. R. 18 East West
3,630 Feet from North / South Line of Section
3,630 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Rooks
Lease Name: Stahl Well #: 2
Date Well Completed: 3-15-1980
The plugging proposal was approved on: 9-13-11 (Date)
by: Pat Bedore (KCC District Agent's Name)
Plugging Commenced: 9-13-11
Plugging Completed: 9-13-11

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
		Surface	8-5/8"	264'	NA
		Production	4-1/2"	3589'	N/A

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.

Cleaned out csg to 1500' Ran tbg to 1488'. Mixed 100 sx w/300# hulls to circ cmt. Pulled tbg. Topped off csg w/ 20sx. Tied onto 8-5/8". Pres tp 100 PSI. 120 total sx 60/40 4% gel & 300#hulls.

RECEIVED
SEP 26 2011

Plugging Contractor License #: 32332 Name: Fischer Well Service
Address 1: PO Box 733 Address 2: _____
City: Hays State: KS Zip: 67601 + 0773
Phone: (785) 628-3837
Name of Party Responsible for Plugging Fees: Tengasco, Inc.
State of KS County, Ellis, ss.
Gary Wagner 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: Gary Wagner

AP