Notice: Fill out COMPLETELY and return to Conservation Division et the address below within

60 days from plugging date.

RECEIVED 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 #: 32016 WICHITA K.A.R. 82-3-117  |  |              | 7  |   | All blanks must be Filled |  |
|---|--|--------------|--|---|---------------------------|--|
|   |  |              | API No. 15 - 141-20,438-00-00  |   |                           |  |
| Name: Pioneer Resources   |  |              | ,  |   |                           |  |
| Address 1: 80 Windmill Dr.  |  |              | 1  |   |                           |  |
| Address 2:  |  |              | 475 Feet from North / X South Line of Section  |   |                           |  |
| Contact Person: Rodger Wells  |  |              | The contract of the con        |   |                           |  |
| Phone: (785 ) 543~5556  |  |              | The second section control of the section control cont |   |                           |  |
| Type of Well: (Check one) Oll Well Gas Well OG X D&A Catho  |  |              | NE NW X SE SW  |   |                           |  |
| Water Supply Well Other: SWD Permit #:  |  |              |  | Osborne   |                           |  |
| ENHR Permit #: Ges Storage Permit #:  |  |              | Lease Name: Well #:  |   |                           |  |
| Is ACO-1 filed? Yes X No if not, is well log attached? X Yes  |  |              | No The street and the |   |                           |  |
| Producing Formation(s): List All (If needed attach another sheet)   |  |              | by: Marvin Mills (KCC District Agent's Name)   |   |                           |  |
| Depth to Top: Bottom: T,D   |  |              |  |   |                           |  |
| Depth to Top: Bottom: T.D   |  |              | Plugging Commenced: 9-9-11  Plugging Completed: 9-9-11   |   |                           |  |
| Depth to Top: Bottom: T.D   |  |              | - rugging Completed:   |   |                           |  |
| Show depth and thickness of all water, oil and gas form   | ations.  |              |  |   |                           |  |
| Oll, Gas or Water Records   |  | Casing       | asing Record (Surface, Conductor & Production)   |   |                           |  |
| Formation Content   | Casing   | Size         |  | Setting Depth   | Pulled Out                |  |
|   |  | 8            | 5/8"   | 218'  | Cmtd. w/150 sax           |  |
|   |  |              |  |   |                           |  |
|   |  |              |  |   |                           |  |
|   |  | ļ            |  |   | ·                         |  |
|   |  | <u> </u>     |  | ·   |                           |  |
| Describe in detail the manner in which the well is plugg coment or other plugs were used, state the character of Run drill pipe to 1,190', pump pump 80 sax cement thru drill drill pipe; push wiper plug to 30 sax cement down rat hole ar | 25 sax cement  Pipe; run drill  40', dump l0 s | thru<br>pipe | drill p<br>to 265  | plug set.  pipe; run dr  b', pump 40                                    | rill pipe to 790',        |  |
| •   |  |              | ٠  | . •   |                           |  |
|   |  |              |  |   |                           |  |
| Plugging Contractor License #: 5184   | · · · · · · · · · · · · · · · · · · ·          | Name: _      | Shields  | Drilling (  | Co.                       |  |
| ddress 1: PO Box 709  |  | Address 2:   |  |   |                           |  |
| City: Russell   |  |              |  |   | zip: 67665 +              |  |
| Phone / 705 . 400 0141  | ······································         |              |  |   |                           |  |
| Name of Party Responsible for Plugging Fees: Pic  | neer Resources                                 |              |  |   |                           |  |
| <b></b>   | RUSSELL  |              | 00   |   |                           |  |
|   |  |              |  | Contractor  Employee of Sparitor or Department on above-described well, |                           |  |
| being first duly sworn on oath, says: That I have knowledge the same are true and correct, so help me God.  |  |              |  |   |                           |  |
| Signature: Buston R   | Leonu  |              |  |   |                           |  |