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 #:33405				API No. 15 - 035-00164-000)			
Name:Anstine & Musgrove Inc				Spot Description:			
Address 1: P O Box 391				SE_SW_NESec. 12Twp. 33S. R. 3VEsstWest 3,028Feet fromNorth //South Line of Section 1,778Feet from/East /West Line of Section Footages Calculated from Nearest Outside Section Corner:			
Address 2:							
City: Ponca City State: OK Zip: 74602 +							
Contact Person: _Gary_Anstine							
Phone: (620_) _441-8165				□ NE □ NW ☑ SE □ SW			
Type of Well: (Check one) Oil Well Gas Well OG D&A Cathodic				County: Cowley			
Water Supply Well Other: SWD Permit #:				Lease Name: Kroth Well #: 1			
ENHR Permit #: E15536.5 Gas Storage Permit #:							
Is ACO-1 filed? Yes No If not, is well log attached? Yes No				The plugging proposal was approved on:(Date)			
Producing Formation(s): List A	NI (If needed attach another	sheet)	by:_			(KCC Distr	ict Agent's Name)
Depth to Top: Bottom: T.D				Plugging Commenced: 10-26-2011			
Depth to Top: Bottom: T.D				— Plugging Completed: 10-26-2011			
Depth to	Top: Botto	m;T.D	````	,gg ••			
Show depth and thickness of	all water, oil and gas forma	ations.					
Oil, Gas or Water Records				Casing Record (Surface, Conductor & Production)			
Formation	Content	Casing	Size	Sett	ing Depth	Pulled Out	
1		SURF	8 5/8	130)	₋₀₋	!
						_	1
		PC	5 1/2		3	-0-	
		j	,				
Describe in detail the manner cement or other plugs were us Set CIBF had been sque Circulate cmt	with 5 sk ezed. Shot to surface	cmt 3200. Pi hole 5 1/2 a c. Cmt ticket	ck up 6 t 355. 31693	on 5 1 Bull	/2no head c	ent down 5	1/2. CE/VED 2/2/2011
Plugging Contractor License #	. 34271		_{Name} . Kiv	vett Plug	ging & Pipe	Pulling, Inc.	CHITA
Address 1: P O Box 57	Address 2: 402 N. 13th St.						
City: _Blackwell	State: OK zip: 74631 + 0577						
Phone: (580) 763-77				· <u> </u>		<u> </u>	
		1, 4,11		- 			
Name of Party Responsible for State of	r Plugging Fees:	Carlle Co	g <u>(U.S.</u>	<u> </u>	<u></u>		
Robert	J. Ans	tine	, ss] Employee	of Operator or	Operator on above	-described well,
being first duly sworn on oath, the same are true and correct Signature:	, sto help/file God.	dge of the facts statements, as			<u></u>		ell is as filed, and
	Mail to: KCC - Cor	servation Division, 130 S.	Market - Roo	m 2078, Wi	chita, Kansas	67202	