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 #: 5011   |   |                               |                                    | API No. 15 - 119-20759000 Spot Description:   |                                   |   |                                       |  |
|---|---|-------------------------------|------------------------------------|---|-----------------------------------|---|---------------------------------------|--|
| Name: Viking Resources, Inc Address 1: 400 N. Woodlawn St/Suite 18  |   |                               |                                    |   |                                   |   | ) []- [ <del>V</del> ]                |  |
| Address 2:  |   |                               |                                    |   |                                   |   | East X West                           |  |
| City: Wichita State: Ks Zip67208 + 4333   |   |                               |                                    | Feet from North / X South Line of Section  2627  eet from East / West Line of Section               |                                   |   |                                       |  |
| Contact Person: Paula Dunagan   |   |                               |                                    | GPS-K   | CC Culated from Near              | rest Outside Section                    | Corner:                               |  |
| Phone: (316 ) 262-2502  |   |                               |                                    | NE NW X SE SW   |                                   |   |                                       |  |
| Type of Well: (Check one) Oil Well X Gas Well OG D&A Cathodic   |   |                               |                                    | County: Meade   |                                   |   |                                       |  |
| Water Supply Well Other: SWD Permit #:  |   |                               |                                    | Lease Name: Clawson Well #: 1-19  |                                   |   |                                       |  |
| ENHR Permit #: Gas Storage Permit #:  |   |                               |                                    | Lease Name: Well #: 1 17 Date Well Completed: (Date)  The plugging proposal was approved on: (Date) |                                   |   |                                       |  |
| Is ACO-1 filed? X Yes N   |   |                               | No - T                             | he plugging   | proposal was and                  | roved on:                               | (Date)                                |  |
| Producing Formation(s): List All (If  | needed attach another                                   | sheet)                        | 3.5                                |   |                                   |   | District Agent's Name)                |  |
| Chester/KC Depth to Top   | : Bottor  | n: T.D. 5700                  | D                                  |   |                                   |   |                                       |  |
| Depth to Top  | :Bottor   | n: T.D                        |                                    | riugging Con  | npleted: 1/                       | 18/12                                   |                                       |  |
| Depth to Top  | : Bottor  | n: T.D                        |                                    | riugging Con  | ipieteu                           |   | · · · · · · · · · · · · · · · · · · · |  |
|   | · · · · · · · · · · · · · · · · · · ·                   |                               |                                    |   |                                   | . •                                     |                                       |  |
| Show depth and thickness of all wa  | iter, oil and gas forma                                 | tions.                        |                                    |   |                                   | *************************************** |                                       |  |
| Oil, Gas or Water Records   |   |                               | Casing Rec                         | asing Record (Surface, Conductor & Production)  |                                   |   |                                       |  |
| Formation Co  | ontent  | Casing                        | Size                               | 5   | Setting Depth                     | Pulled Out                              |                                       |  |
| Marrow Oi   | 1,Gas,Water   | Surface                       | 8 5/                               | /8  | 1574                              | -0-                                     |                                       |  |
| KC Swope  | 11 11   | Production                    | 5 1/                               | /2  | 5668                              | 1996                                    | ,                                     |  |
|   |   |                               |                                    |   |                                   |   |                                       |  |
|   |   |                               |                                    |   |                                   |   |                                       |  |
| Describe in detail the manner in with cement or other plugs were used, so the CIBP @4850' Wilden welded steel plate | state the character of s<br>/2sx cmt on<br>ped 50 sx. c | top. Cmt csg.                 | tom), to (top)<br>@1996,<br>pump 2 | ) for each plu<br>ran tu<br>20 sx.  | og set.<br>bing to 1<br>cmt 60' t | 600' pump 5<br>o surface.               | 0 sx. cmt                             |  |
|   |   |                               | <b>.</b>                           |   |                                   |   | FEB 0 2 2012                          |  |
| Plugging Contractor License #: 8733   |   |                               | Name:                              | Jarry Dunkin Inc  |                                   |   |                                       |  |
| Triagging Contractor Election in  |   |                               | Name                               | KCC WICHITA   |                                   |   |                                       |  |
| Address 1: P.O. Box 389   |   |                               |                                    | ddress 2:   |                                   |   |                                       |  |
| City: Enid  |   |                               | St                                 | State: 0k1a Zip:73702 +   |                                   |   |                                       |  |
| Phone: (580) 237-6152   | · · · · · · · · · · · · · · · · · · ·                   |                               |                                    |   |                                   |   |                                       |  |
| Name of Party Responsible for Plug  | gging Fees: <u>Vikir</u>                                | ng Resources, I               | nc.                                |   |                                   |   |                                       |  |
| State of Kausas   | County,   | Sepenial                      |                                    | SS.   |                                   |   |                                       |  |
| BULA Q DUDGED   |   |                               |                                    | Employee of Operator or Operator on above-described well,   |                                   |   |                                       |  |
|   | (Print Name)  | <b>.</b>                      |                                    |   | •                                 | ,                                       |                                       |  |
| being first duly sworn on oath, says the same are true and correct, so he   | _   | e of the facts statements, ar | ia matters he                      | erein contain   | ea, and the log of                | the above-described                     | well is as filed, and                 |  |