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 #: 5135	API No. 15 - 147-20,665-00-00			
Name:John O. Farmer, Inc.	Spot Description:			
Address 1: P.O. Box 352	SE_SE_NE_SW Sec.4 Twp.2 S. R. 18 East ✓ West			
Address 2:				
City: Russell State: KS				
Contact Person: <u>Marge Schulte</u> Phone: ( <u>785</u> ) <u>483-3145, Ext. 214</u>				
	—			
Type of Well: (Check one) Oil Well Gas Well  Water Supply Well Other:	County:1 Timps			
ENHR Permit #: Gas Sto	Lease Name: Neiller Offit Well #:			
Is ACO-1 filed? ✓ Yes No If not, is well	Date well Completed: Z-1-1Z			
Producing Formation(s): List All (If needed attach another	by: Ray Dinkel (KCC District Agent's Name)			
None Depth to Top: Botto	Plugging Commenced: 5:30 A.M., 2-7-12			
Depth to Top: Botto				
Depth to Top: Botto	— Flugging (	Joinpieted	VV /3.191., 2-1-12	
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"	218'	-0-
	·			
		· · · · · · · · · · · · · · · · · · ·		
	1	-		
Describe in detail the manner in which the well is plugg cement or other plugs were used, state the character of	same depth placed from (bot			ds used in introducing it into the hole. If
1st Plug @ 1785' w/25 sks. cement - 2nd Plug @ 1200 3rd Plug @ 266' w/40 sks. cement - 4th plug @ 40'	w/ 100 sks. cement w/ 10 sks. cement			
30 sks. cement in rathole	•			RECEIVED
(total used: 205 sks. 60/40 Pozmix, 4% gel, 1/4# per sk. drilling mud was placed between all stages			MOCIVED	
and the place of the stages	•			MAR 2-9 2012
				•
				KCC WICHITA
Plugging Contractor License #: 99996		Name: Al	lied Cementing	
Address 1: P.O. Box 31 •				
		State:	Kansas	Zip: 67665 + 0 0 3 1
Phone: ( 785 ) 483-2627	·			•
Name of Party Responsible for Plugging Fees:	ohn O. Farmer, Inc.			•
State of Kansas County, _	Russell	, ss.		
John O. Farmer III, President of Joh (Print Name)	n O. Farmer, Inc.	Em	ployee of Operator or	Operator on above-described well,
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: July John July	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			3-28-12