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 #: 3273				API No. 15 - 095-21301 · 00 · 00			
Name: Herman Loeb LLC				Spot Description:			
Address 1: Box 524				SE NE NW NW Sec. 13 Twp. 29 S. R. 10 East West			
Address 2:				4,925 Feet from North / South Line of Section			
city: Lawrenceville State: IL Zip: 62439 + 0524_				4,067 Feet from Feet from Section			
Contact Person: Tracy Black				Footages Calculated from Nearest Outside Section Corner:			
Phone: (316_) 215-1873				NE NW ✓SE SW			
Type of Well: (Check one) Oil Well Gas Well OG D&A Cathodic				County: Kingman			
Water Supply Well Other: SWD Permit #: SWD Permit #: Gas Storage Permit #:				Lease Name: Adelhardt Well #: A-1			
Is ACO-1 filed? Yes No If not, is well log attached? Yes No				Date Well Completed:			
Producing Formation(s): List All (If needed attach another sheet)				by: BJ (KCC District Agent's Name)			
Depth to Top: Bottom: T.D				Plugging Commenced: 1/11/12			
Depth to Top: Bottom: T.D				Plugging Commenced: 1/11/12 Plugging Completed: 1/12/12			
Depth to Top: Bottom:T.D				— Plugging Completed.			
Show depth and thickness of all water, oil and gas formations.							
Oil, Gas or Water Records				asing Record (Surface, Conductor & Production)			
Formation	Content	Casing	Size		Setting Depth	Pulled Out	
	1		8-5/8"		250'	None	
			4-1/2"		2638'	1580'	
,							
cement or other plugs were used, state the character of same depth placed from (bottom), to (top) for each plug set. Checked hole, cement @ 1750'. Got 10" stretch. Pumped water down, cut pipe @ 1580'. Pulled up to 950', pumped 35sx. Pulled up to 300', pumped 110sx. Circulated cement to surface. Plugging Complete.							
Plugging Contractor License #: 31529 Address 1: PO Box 467			Name: Mike's Testing & Salvage, Inc. Address 2:				
City: Chase				State: KS	<u> </u>	Zip: <u>0/324</u> +	
Phone: (620) 938-29	943						
Name of Party Responsible fo	r Plugging Fees: <u>Hern</u>	nan Loeb					
State of Kansas County, Rice				_ , SS.			
Mike Kelso (Print Name)				_ Emp	ployee of Operator or	Operator on above-described well,	
being first duly sworn on oath, the same are true and correct Signature:	says: That I have knowled so help me God.	dge of the facts statements, ar	d matter		·	RECEIVED	
					-	FEB 5.3 SOIK	