**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 #:3911   Name: Rama Operating Co., Inc.   Address 1:101 S Main St   Address 2:   City: _Stafford State: KSzip: 67578 _ + 1429   Contact Person:Robin_Austin   Phone: (620) _234-5191   Type of Well: (Check one) Oil Well Gas Well OG D&A Cathodic				SE_SE_SE_Sec.29_Twp.26_S. R. 13East											
								County:	Pratt						
								Water Supply Well Other: SWD Permit #:				Lease Name: Mowbray Well #: 1			
								ENHR Permit #: Gas Storage Permit #:				1 Date Well Completed:			
								Is ACO-1 filed? Yes	No If not, is well	log attached? Yes	] No	The pluggi	ng proposal was appr	oved on: (D	ate)
								Producing Formation(s): List A			1	<sub>by:</sub> Ste	ve Peifer	(KCC <b>District</b> Agent's Na	me)
								Depth to Top: Bottom: T.D				Plugging Commenced: 2/28/12			
								Plugaina C	Completed: 3/1/1	2-2-1	_ %				
Depth to	Top: Botto	m: T.D		00 0	•										
Show depth and thickness of a		ations.													
Oil, Gas or Water Records			Casing Record (		rd (Surface, Conductor & Production)										
Formation	Content	Casing	Size		Setting Depth	Pulled Out	_								
			10 3/4	"	850'	None									
			<b></b>	***************************************	10-11	1000									
			7"		4251'	1202'									
				•			_								
		·													
2050'. Cut casing h Pumped 20sx gel v 40sx 60/40poz. Ce	n, perf hole @ 2 60/40poz. Displa lead off, cut cas vith 75sx 60/40p ment circulated	559'. Ran in 2600' ced to bottom. Pul ing loose @ 1202' oz. Pulled to 415', to surface. Pulled	of 2-3/ led out Laid of pumporest of	/8 renta t tubing down 7' ed 75s; tubing.	il. Rigged up ( . Ran bailer, t '. Ran in 2-3/8 k 60/40poz. P	agged top cement @	• .								
Address 1: PO Box 467			Address 2	).											
						zip: 67524 +									
Phone: (620 ) 938-29	43					•									
Name of Party Responsible for		a Operating Co., Inc.				s .	<u></u>								
State of KS	County,	Rice		, SS.											
Mike Kelso			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		oloyee of Operator or		(i								
	(Print Name)						eII,								
being first duly sworn on oath,	says: That I have knowled	ge of the facts statements, ar	nd matters	herein con	tained, and the log of	the above-described well is as filed RECEIVE	and								
						KECEIVE	J								
Signature:	L 2/2					MAN 4 O OC									