

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 #: 9913
Name: Bullseye Petroleum, Inc.
Address 1: 15820 Plymouth Rd.
Address 2: _____
City: Wichita State: KS Zip: 67230 + _____
Contact Person: William Ash
Phone: (316) 733-5280
Type of Well: (Check one) Oil Well Gas Well OG D&A Cathodic
 Water Supply Well Other: _____ SWD Permit #: D-270399/87
 ENHR Permit #: _____ Gas Storage Permit #: _____
Is ACO-1 filed? Yes No If not, is well log attached? Yes No
Producing Formation(s): List All (If needed attach another sheet)
_____ Depth to Top: _____ Bottom: _____ T.D. _____
_____ Depth to Top: _____ Bottom: _____ T.D. _____
_____ Depth to Top: _____ Bottom: _____ T.D. _____

API No. 15 - 035-23779-00-02
Spot Description: SW SE
_____ C SE Sec. 4 Twp. 31 S. R. 6 East West
1,920 1258 Feet from North / South Line of Section
1,320 1415 Feet from East / West Line of Section
GPS-KCC
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Cowley
Lease Name: Drake Well #: A-2
Date Well Completed: 5/92 and converted to SWD 4/95
The plugging proposal was approved on: June 22, 2012 (Date)
by: Duane Krueger/Steve VanGieson (KCC District Agent's Name)
Plugging Commenced: June 22, 2012
Plugging Completed: June 25, 2012

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	310	8 5/8	310	None
Arbuckle	production	3298	5 1/2	3300	1465+-

Describe in detail the manner in which the well is plugged, indicating where the mud fluid was placed and the method or methods used in introducing it into the hole. If cement or other plugs were used, state the character of same depth placed from (bottom), to (top) for each plug set.

Built bridge corrected footage at 3250, dump/bail 5 sacks cement, pulled approx. 1465 feet of 5 1/2" casing, mix 200 sacks of 60-40 Poz Mix 2% Gel, added addlt. 2% gel, circulated from 325 feet to surface.

Plugging Contractor License #: 31529 Name: Mike's Testing & Salvage, Inc.
Address 1: P.O. Box 467 Address 2: _____
City: Chase State: KS Zip: 67524 + _____
Phone: (620) 938-2943
Name of Party Responsible for Plugging Fees: Bullseye Petroleum, Inc.
State of KANSAS County, SEDGWICK, ss.
William G. Ash, V.P./Operations Mgr. Employee of Operator or Operator on above-described well.
(Print Name)

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: William G. Ash 7-10-12

Mail to: KCC - Conservation Division, 130 S. Market - Room 2078, Wichita, Kansas 67202

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FIELD ORDER N° C 39781

BOX 438 • HAYSVILLE, KANSAS 67060
316-524-1225

DATE 6/25 20 12

IS AUTHORIZED BY: Bullseye Petero
(NAME OF CUSTOMER)

Address _____ City _____ State _____

To Treat Well As Follows: Lease Drake Well No. A 2 Customer Order No. _____

Sec. Twp. Range _____ County Lawley State Ks

CONDITIONS: As a part of the consideration hereof it is agreed that Copeland Acid Service is to service or treat at owners risk, the hereinbefore mentioned well and is not to be held liable for any damage that may accrue in connection with said service or treatment. Copeland Acid Service has made no representation, expressed or implied, and no representations have been relied on, as to what may be the results or effect of the servicing or treating said well. The consideration of said service or treatment is payable. There will be no discount allowed subsequent to such date. 6% interest will be charged after 60 days. Total charges are subject to correction by our invoicing department in accordance with latest published price schedules.

The undersigned represents himself to be duly authorized to sign this order for well owner or operator.

THIS ORDER MUST BE SIGNED BEFORE WORK IS COMMENCED _____ By _____
Well Owner or Operator Agent

CODE	QUANTITY	DESCRIPTION	UNIT COST	AMOUNT
	60	miles mileage charge	4.00	240.00
	60	miles pickup mileage charge	2.00	120.00
		Cement Pump Truck for Plug		650.00
	200	Sacks Holup Puz 97 bel	9.25	1850.00
	4	add 97 bel	220.00	880.00
	204	Bulk Charge	1.25	255.00
		Bulk Truck Miles $898 \times 1.00 \text{ miles} = 898 \times 1.00$		898.00
		Process License Fee on _____ Gallons		25
		TOTAL BILLING		3788.00

I certify that the above material has been accepted and used; that the above service was performed in a good and workmanlike manner under the direction, supervision and control of the owner, operator or his agent, whose signature appears below.

Copeland Representative Tu Datta
Station GA

William Ash
Well Owner, Operator or Agent
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Remarks _____

NET 30 DAYS

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TREATMENT REPORT

Acid Stage No.

Date: 6/25/12 District: 63 F. O. No: 39781

Company: Bullseye Petroleum

Well Name & No: DRAL A-2

Location: _____ Field: _____

County: Cowley State: _____

Casing: Size: 5 1/2 Type & Wt. _____ Set at _____ ft.

Formation: _____ Perf. _____ to _____

Formation: _____ Perf. _____ to _____

Formation: _____ Perf. _____ to _____

Liner: Size: _____ Type & Wt. _____ Top at _____ ft. Bottom at _____ ft.

Cemented: Yes/No. Perforated from _____ ft. to _____ ft.

Tubing: Size & Wt. _____ Swung at _____ ft.

Perforated from _____ ft. to _____ ft.

Open Hole Size: _____ T. I. _____ ft. P. I. to _____ ft.

Type Treatment: Amt. _____ Type Fluid _____ Sand Size _____ Pounds of Sand _____

Bkdown: _____ Bbl. /Gal. _____

_____ Bbl. /Gal. _____

_____ Bbl. /Gal. _____

_____ Bbl. /Gal. _____

Flush _____ Bbl. /Gal. _____

Treated from _____ ft. to _____ ft. No. ft. _____

from _____ ft. to _____ ft. No. ft. _____

from _____ ft. to _____ ft. No. ft. _____

Actual Volume of Oil/Water to Load Hole: _____ Bbl. /Gal.

Pump Trucks: No. Used: Std. _____ Sp. _____ Twin _____

Auxiliary Equipment _____

Packer: _____ Set at _____ ft.

Auxiliary Tools _____

Plugging or Sealing Materials: Type _____

_____ Gal. _____ lb.

Company Representative _____

Treater: [Signature]

TIME a.m / p.m.	PRESSURES		Total Fluid Pumped	REMARKS
	Tubing	Casing		
2:30				on location
:				start H2O to get Circulation 10000 lbs
3:30				mix 200 sacks to Circulate for 325'
:				pull casing
4:30				ful Casing
:				ful Sack's
:				200'

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COPELAND

Acid & Cement

POST OFFICE BOX 438
 HAYSVILLE, KS 67060
 (316) 524-1225
 (316) 524-1027 FAX

Invoice

Page: 1

BURRTON, KS ♦ GREAT BEND, KS
 (620) 463-5161 (620) 793-3366
 FAX (620) 463-2104 FAX (620) 793-3536

INVOICE NUMBER:
C39781-IN

BILL TO:
BULLSEYE PETROLEUM
C/O WILLIAM ASH
15820 PLYMOUTH RD.
WICHITA, KS 67230

LEASE: DRAKE A-2

DATE	ORDER	SALESMAN	ORDER DATE	PURCHASE ORDER	SPECIAL INSTRUCTIONS	
06/30/2012	C39781		06/25/2012		NET 30	
QUANTITY	U/M	ITEM NO./DESCRIPTION		D/C	PRICE	EXTENSION
60.00	MI	CEMENT MILEAGE PUMP TRUCK		0.00	4.00	240.00
60.00	MI	CEMENT MILEAGE PU TRUCK		0.00	2.00	120.00
1.00	EA	CEMENT PUMP CHARGE		0.00	650.00	650.00
200.00	SAX	60-40 POZ MIX 2% GEL		0.00	9.25	1,850.00
4.00	SAX	2% ADDITIONAL GEL		0.00	22.00	88.00
204.00	EA	BULK CHARGE		0.00	1.25	255.00
539.00	MI	BULK TRUCK - TON MILES		0.00	1.10	592.90
REMIT TO: P.O. BOX 438 HAYSVILLE, KS 67060		COP		Net Invoice:		3,795.90
RECEIVED BY _____		FUEL SURCHARGE IS NOT TAXABLE AND IS ADDED TO MILEAGE, PUMP AND OR DELIVERY CHARGES ONLY.		COWCO Sales Tax:		44.20
		NET 30 DAYS		Invoice Total:		<u>3,840.10</u>

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There will be a charge of 1.5% "per month" (18% annual rate) on all accounts over 30 days past due.

Copeland Acid & Cement is a subsidiary of Gressel Oil Field Service
 Gressel Oil Field Service reserves a security interest in the goods sold until the same are paid for in full and reserve all the rights of a secured party under the Uniform Commercial Code