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Form CP-4
March 2009

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

KCC WICHITA

Type or Print on this Form
Form must be Signed
All blanks must be Filled

OPERATOR: License #: 32016
Name: Rodger D Wells dba Pioneer Resources
Address 1: 80 Windmill Dr.
Address 2: _____
City: Phillipsburg State: KS Zip: 67661 + _____
Contact Person: Harold Bellerive
Phone: (785) 635-4531
Type of Well: (Check one) Oil Well Gas Well OG O&A Cathodic
 Water Supply Well Other: GW Re-entry SWD Permit #: _____
 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 - 15-137-00162-00-01
Spot Description: _____
SW SW SW Sec. 24 Twp. 5 S. R. 21 East West
330 Feet from North / South Line of Section
330 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Norton
Lease Name: Baird Well #: 1
Date Well Completed: 03-14-11
The plugging proposal was approved on: 03-14-11 (Date)
by: Rich Williams (KCC District Agent's Name)
Plugging Commenced: 03-14-11
Plugging Completed: 03-14-11

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
N/A		Surf.	8.625	206'	

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.

tubing at 600'. Pumped 125 sacks cement--circulated to surface. Pulled tubing. Filled casing with 15 sacks cement.

Plugging Contractor License #: 33755 Name: Quality Plus Oilfield Services, LLC
Address 1: 1227 Highway 36 Address 2: _____
City: Oberlin State: KS Zip: 67749 + 4938
Phone: (_____) _____
Name of Party Responsible for Plugging Fees: Pioneer Resources
State of Kansas County, Graham, ss.
Sandra L. Bellerive, Agent for Operator 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: Sandra L Bellerive

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

SR