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

API No. 15 - 001-23613 · 00 · 00 OPERATOR: License #: 34078 Spot Description: Elsmore Shoe String B&S Oil Name: ____ NE_NVNE Sec. 18 Twp. 26 S. R. 21 East West Address 1: 4290 Nebraska Road 5269 5284 Feet from North / V South Line of Section Address 2: 1760 1747 Feet from J East / West Line of Section Footages Calculated from Nearest Outside Section Corner: City: Moran ____ State: **KS**__ Zip: <u>66755</u> + _____ Contact Person: Brent Newman Phone: (162C) 363-4788 V NE NW SE SW Type of Well: (Check one) A Oil Well Gas Well OG D&A Cathodic County: _Allen SWD Permit#:_ Water Supply Well Other: Lease Name: DR Nelson Well #: Q-1 VENHR Permit # E 19945 Gas Storage Permit #: _ Date Well Completed: 3/13 Is ACO-1 filed? Yes ✓ No If not, is well log attached? Yes Vo The plugging proposal was approved on: ____ (Date) Producing Formation(s): List All (If needed attach another sheet) (KCC **District** Agent's Name) Bottom: 753 T.D. 865 Bartlesville Depth to Top: 740 Plugging Commenced: 8.24.2012 Bottom: _____ T.D. ____ Depth to Top: Plugging Completed: 8.24.2012 Bottom: ___ _ Depth to Top: __ 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 Bartlesville 2-7/8 863 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. Run in 863' 1" pipe and washed to bottom. Pumped 15 Sacs Cement and pulled 1" out to 450'. Pumped 7 Sacs Cement. Pulled 1" all out and Topped well off with 3 more Sacs. Plyged well with Plugging Contractor License # 23813 Name: Steve Becker Address 1: 4500 Conn. Road Address 2: __ _____ state: <u>Kansas</u> z_{ip:} 66732 + city: Elsmore Phone: (162C) 363-4124 Name of Party Responsible for Plugging Fees: ___ State of Kansas Employee 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. KCC WICHITA