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

KCC WICHITA

API No. 15 - 191-21869 · 00 · 00 OPERATOR: License #: 6044 Name: Stelbar Oil Corporation, Inc. Spot Description: ___ C _w/2_NW_SE Sec. 27 Twp. 34 S. R. 2 __ VEast West Address 1: 1625 N. Waterfront Parkway, Suite 200 4,980 1966 Feet from North / South Line of Section 2,310 2259 Feet from 🔽 East / 🗌 West Line of Section City: Wichita State: KS__ Zip: 67206_ + ____ Footages Calculated from Nearest Outside Section Corner: Contact Person: Roscoe Mendenhall Phone: (.316.) 440-7605 NE NW V SE Sw Type of Well: (Check one) / Oil Well Gas Well OG D&A Cathodic County: Sumner Water Supply Well Other: SWD Permit #:_____ Lease Name: Norrish _____ Well #: 8 ENHR Permit#: Gas Storage Permit #: ___ Date Well Completed: __January 1096 Is ACO-1 filed? Yes No If not, is well log attached? Yes No The plugging proposal was approved on: 10/16/2011 by: __Jeff Klock Producing Formation(s): List All (If needed attach another sheet) Cleveland Depth to Top: 3124' Bottom: 3130' T.D. 3130' Plugging Commenced: 10/17/2011 Bottom: ______ T.D. ____ _____ Depth to Top: _____ 10/19/2011 Plugging Completed;___ _____ Depth to Top: _____ Bottom: _____ T.D. ____ Show depth and thickness of all water, oil and gas formations. Oil, Gas or Water Records Casing Record (Surface, Conductor & Production) Formation Pulled Out Content Casing Size Setting Depth Cleveland (3124'-3130') 8-5/8" Oil, Gas, Saltwater Surface 257' None Production 5-1/2" 3189' 317' 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.

Set CIBP @ 3066' and dump two sacks cement on CIBP. Cut 5-1/2" casing at 317' and pull same. RIH with 2-3/8" tubing to 300'. Mix and pump 100 sacks cement. Circulated cement to surface, POOH with tubing, and filled hole with additional 36 sacks cement. All cement was 60/40 pozmix with 4% gel. Cut off 8-5/8" casing four feet below surface and weld on cap.

Plugging Contractor License #: 6044	Name:	Stelbar Oil Co	rporation, Inc.		
Address 1: 1625 N. Waterfront Parkway, Suite 200	Address 2	:		- -	
City: Wichita		State: KS	Zip: 67	<u> 206</u> + _	
Phone: (316) 264-8378					
Name of Party Responsible for Plugging Fees: Stelbar Oil Corporation, In	nc				
State of Kansas County, Sedgwick		, ss.			
Roscoe Mendenhall (Print Name)		Employee of 0	Operator or Operato	r on above-desc	ribed well,
being first duly sworn on eath, says: That I have knowledge of the facts statements, ar	nd matters	herein contained, an	d the log of the above-de	scribed well is a	s filed, and
the same are true and correct, so help me God. Signature:		_	11/8/11	RECEIV	ED
Mail to: KCC - Conservation Division 130 S	Market -	Room 2078 Wichit	a Kansas 67202	NOV 0 9	2011



REMIT TO

Consilidated Oil Well Services, LLC Dept. 970 P.O. Box 4346

Houston, TX 77210-4346

MAIN OFFICE P.O. Box 884 Chanute, KS 66720

620/431-9210 • 1-800/467-8676 Fax 620/431-0012

INVOICE			Invoice #	24531
Invoice Date: 10				age 1
STELBAR OIL SUITE 200 1625 N. WATE WICHITA KS (316)264-837	RFRONT PARKWAY 67206-6602	NORRISH #8 31686 27-34-2 10-18-11 KS		
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Part Number 1131 1118B	Description 60/40 POZ MIX PREMIUM GEL / BENTON	136.00		
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Signed

Date



1 ENTERED

TICKET NUMBER 31686

LOCATION # 180 EIDOGO FOREMAN Jacob Storm

PO Box 884, Chanute, KS 66720 620-431-9210 or 800-467-8676

FIELD TICKET & TREATMENT REPORT

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ASING DEPTH	~ <i>1</i>	DRILL PIPE		_TUBING			OTHER	·
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I acknowledge that the payment terms, unless specifically amended in writing on the front of the form or in the customer's account records, at our office, and conditions of service on the back of this form are in effect for services identified on this form



L00-7E00

NEER Unsurpassed Service. Premium Equipment. The Best People.

Service Order No. 1-3507!

Date:

10/17/11

						_		Phor	ie: (785) 62 —	25 - 3858	Fa	c: (785) 625 - 8639	
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ENTER INTO THIS CONTRACT ON BEHALF OF THE CUSTOMER AND AGREES TO THE TERMS AND CONDITIONS SET FORTH ON THE REVERSE SIDE HEREOF. Customer Approval			Y	マ			3		=				
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