

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 #: 3880
Name: K.C. Resources, Inc.
Address 1: P.O. Box 6749
Address 2: _____
City: Snowmass Village State: CO Zip: 81615 + _____
Contact Person: Gary Schelling
Phone: (970) 927-2764
Type of Well: (Check one) Oil Well Gas Well OG D&A Cathodic
 Water Supply Well Other: _____ 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 - 095-00505-0001
Spot Description: _____
SW - NW - - - Sec. 27 Twp. 28 S. R. 7 East West
3,300 Feet from North / South Line of Section
4,620 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Kingman
Lease Name: Alameda Unit Well #: 6-3
Date Well Completed: 5-1-1962
The plugging proposal was approved on: _____ (Date)
by: Jeff Klock (KCC District Agent's Name)
Plugging Commenced: 9-22-2010
Plugging Completed: 10-5-2010

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	8.625	265'	0
		Production	4.5	4443'	0

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.

2500' 50 sx w/ uncommon cement
1075' 50 sx w/ uncommon cement
675' 50 sx w/ uncommon cement
315' 65 sx circulated to surface

KCC WICHITA
MAR 10 2014
RECEIVED

Plugging Contractor License #: 99996 Name: Allied Cementing Co.
Address 1: P.O. Box 368 Address 2: _____
City: Medicine Lodge State: Kansas Zip: 67104 + _____
Phone: (620) 886-5926
Name of Party Responsible for Plugging Fees: K.C. Resources, Inc.
State of Colorado County, Eagle, ss.
Gary Schelling 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: Gary A. Schelling

AR