

**PLUGGING RECORD**

OAC 165:10-1-10

**WELL INFORMATION**

**Plug Date: May 22, 2014**

**API No:** 3501900248

**Well #:** 1

**Well Name:** ISBELL

**Operator:** POLK B R INC

**Operator #:** 1721

**Section:** 2      **Township:** 5S      **Range:** 1W      **Meridian:** Indian

**1/4:**      **SE4 1/4:**      **SE4 1/4:**      **SW4 1/4:**

**Total Depth:** 6500      **Base of Treatable:** Water: 760      **Well Classification:**

**CONTACT INFORMATION**

**Contact Name:** Tom W Klos

**Telephone:** 2142000402

**Address 1:** 5715 N WESTERN AVE STE C

**Address 2:**

**City:** OKLAHOMA CITY      **State:** OK      **Zipcode:** 73118-1239      **Country:** US

**Email Address:**

**Fax:**

**PIPE RECORDS**

**PERFORATION DEPTHS**

String Name	Size	Run	Pulled
SURFACE	10.750	226	0
PRODUCTION CASING	5.5	5916	0

From Depth	To Depth
5014	5020
5023	5027

**PLUGS**

Plug Type	Hole Size	Depth	No. Sacks of Cement	Slurry Volume	Calculated TOC	Top of Plug
CEM	5.5	276	225	47	4	4
CEM	5.5	810	75	15	650	557
CEM	5.5	5026	40	8	4700	4946

**Remarks:** CIRC HOLE W/ MUD & SPOT 40 SKS CEMENT 5026'-4700'. WOC. TAG TOC @ 4946'. PERF @ 810'. SQUEEZE W/75 SKS. WOC. TAG TOC @ 557'. PERF @ 276'. CIRC CEMENT TO SURFACE W/225 SKS. CUT OFF WELLHEAD 4' BGL & CAP W/ I.D. PLATE

**Reason For Plugging:** NON-COMMERCIAL

**CEMENTER CERTIFICATION INFORMATION**

**Name:**      **Title:**

**Company Name:** ORR ENTERPRISES, INC.

**Permit No:** 825

**Address 1:**

**Address 2:** P.O. Box 1706

**City:** DUNCAN

**State:** OK      **Zipcode:** 73534

**Phone:** (580) 251-9618

I declare that I have knowledge of the contents of this report and am authorized by my organization to make this report, which was prepared by me or under my supervision and direction with the data and facts stated herein to be true, correct and complete to the best of my knowledge and belief.

Electronic Signature: POLK B R INC