

**PLUGGING RECORD**

OAC 165:10-1-10

**WELL INFORMATION**

**Plug Date: July 28, 2014**

**API No:** 35045234900000

**Well #:** A-1

**Well Name:** TURNER

**Operator:** WHEELER ENERGY LLC

**Operator #:** 22145

**Section:** 23      **Township:** 18N      **Range:** 22W      **Meridian:** 1M

**C 1/4:**      **W2 1/4:**      **W2 1/4:**      **NE 1/4:**

**Total Depth:** 0      **Base of Treatable: Water:** 0      **Well Classification:**

**CONTACT INFORMATION**

**Contact Name:** Roger Wheeler

**Telephone:** 405-447-3017

**Address 1:** 401 S BOSTON AVE STE 2530

**Address 2:** PO BOX 1439

**City:** TULSA

**State:** OK

**Zipcode:** 74101-1439

**Country:** US

**Email Address:**

**Fax:**

**PIPE RECORDS**

**PERFORATION DEPTHS**

String Name	Size	Run	Pulled
CONDUCTOR	20	60	0
SURFACE	8.625	1265	0

From Depth	To Depth
277	277

**PLUGS**

Plug Type	Hole Size	Depth	No. Sacks of Cement	Slurry Volume	Calculated TOC	Top of Plug
CEM	7.875	8500	30	6	8400	8400
CEM	7.875	7300	30	6	7200	7200
CEM	8.625	1367	26	916	916	1141
CEM	8.625	480	50	10	300	230
CEM	8.625	34	20	8	4	4

**Remarks:**

**Reason For Plugging:** PLUG TO ABANDON

**CEMENTER CERTIFICATION INFORMATION**

**Name:**

**Title:**

**Company Name:** ALLIED CEMENTING CO., INC

**Permit No:** 781

**Address 1:** 281 HWY & LAKE CITY ROAD

**Address 2:**

**City:** MEDICINE LODGE

**State:** KS

**Zipcode:** 67104

**Phone:** (316) 886-5926

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: WHEELER ENERGY LLC