

**PLUGGING RECORD**

OAC 165:10-1-10

**WELL INFORMATION**

**Plug Date: October 27, 2014**

**API No:** 3500722476

**Well #:** 2

**Well Name:** GUST SPANGLER

**Operator:** SPELLER OIL CORPORATION

**Operator #:** 5136

**Section:** 9      **Township:** 3N      **Range:** 23E      **Meridian:** Cimarron

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

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

**CONTACT INFORMATION**

**Contact Name:** Nancy Jost

**Telephone:** 9184823542

**Address 1:** 3535 NW 58TH ST STE 900

**Address 2:**

**City:** OKLAHOMA CITY      **State:** OK      **Zipcode:** 73112-4889      **Country:** US

**Email Address:**

**Fax:**

**PIPE RECORDS**

**PERFORATION DEPTHS**

String Name	Size	Run	Pulled
SURFACE	8.625	1497	0
PRODUCTION	4.5	7196	0
TBG	2.375	7080	0

From Depth	To Depth
7123	7176

**PLUGS**

Plug Type	Hole Size	Depth	No. Sacks of Cement	Slurry Volume	Calculated TOC	Top of Plug
CIBP + CEM	2.375	2	0	1	4973	4973
CEM	8.625	1550	375	442	0	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: SPELLER OIL CORPORATION