



Notice: Fill out COMPLETELY and return to Conservation Division at the address below within 60 days from plugging date.

KANSAS CORPORATION COMMISSION 1081220
OIL & GAS CONSERVATION DIVISION

Form CP-4
March 2009

Type or Print on this Form
Form must be Signed
All blanks must be Filled

WELL PLUGGING RECORD
K.A.R. 82-3-117

OPERATOR: License #: _____
 Name: _____
 Address 1: _____
 Address 2: _____
 City: _____ State: _____ Zip: _____ + _____
 Contact Person: _____
 Phone: (_____) _____
 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 - _____
 Spot Description: _____
 _____ - _____ - _____ Sec. _____ Twp. _____ S. R. _____ East West
 _____ Feet from North / South Line of Section
 _____ Feet from East / West Line of Section
 Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
 County: _____
 Lease Name: _____ Well #: _____
 Date Well Completed: _____
 The plugging proposal was approved on: _____ (Date)
 by: _____ (KCC District Agent's Name)
 Plugging Commenced: _____
 Plugging Completed: _____

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

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.

Plugging Contractor License #: _____ Name: _____
 Address 1: _____ Address 2: _____
 City: _____ State: _____ Zip: _____ + _____
 Phone: (_____) _____
 Name of Party Responsible for Plugging Fees: _____
 State of _____ County, _____, ss.
 _____ 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.

Submitted Electronically

Mail to: KCC - Conservation Division, 130 S. Market - Room 2078, Wichita, Kansas 67202

QUALITY OILWELL CEMENTING, INC.

Federal Tax I.D.# 20-2886107

Phone 785-483-2025
Cell 785-324-1041

Home Office P.O. Box 32 Russell, KS 67665

No. 413

Date	5-11-12	Sec.	32	Twp.	12	Range	19	County	Ellis	State	Ks	On Location		Finish	2:15 PM	
Lease	Bahl	Well No.	#1		Location Ycemento + J-70, 2N to Emmersan Rd,											
Contractor	Extreme well Service							Owner	210, 440, E/into							
Type Job	Plug							To Quality Oilwell Cementing, Inc. You are hereby requested to rent cementing equipment and furnish center and helper to assist owner or contractor to do work as listed.								
Hole Size	T.D.							Charge To	Owen's pumping Service							
Csg.	5 1/2"							Depth	3851'							
Tbg. Size	2"							Depth	3545'							
Tool	Depth							City	State							
Cement Left in Csg.	Shoe Joint							The above was done to satisfaction and supervision of owner agent or contractor.								
Meas Line	Displace H2O @							Cement Amount Ordered	300 sx 60/40 4% Gel 500 #							

EQUIPMENT

Pumptrk	9	No.	Cementer	Hulls 10 sx Gel											
			Helper	Common											
Bulktrk	7	No.	Driver	Poz. Mix											
			Driver												
Bulktrk	p.u.	No.	Driver	Gel.											
			Driver												

JOB SERVICES & REMARKS

Remarks:	Calcium
Rat Hole	Hulls
Mouse Hole	Salt
Centralizers	Flowseal
Baskets	Kol-Seal
D/V or Port Collar	Mud CLR 48
3545' - 10 sx gel - 755x 60/40	CFL-117 or CD110 CAF 38
4% gel 300 # Hulls	Sand
	Handling
	Mileage

FLOAT EQUIPMENT

2650' - 100 sx 60/40 4% Gel 100 # Hulls	Guide Shoe
1050' - 105 sx 60/40 4% Gel 100 # Hulls	Centralizer
Top off	Baskets
5 1/2" Casing w/ 15 sx 60/40	AFU Inserts
4% Gel	Float Shoe
	Latch Down
8 5/8" was full of Cement.	
Cement did Circulate	Pumptrk Charge
	Mileage

X Signature Owen M. Junde	Tax
	Discount
	Total Charge