



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

KANSAS CORPORATION COMMISSION 1090826
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 WELL SERVICE, INC.

Federal Tax I.D. # 481187368

5477

Home Office 324 Simpson St., Pratt, KS 67124

Todd's Cell 620-388-5422
Office / Fax 620-672-3663

Rich's Cell 620-727-3409
Brady's Cell 620-727-6964

Date	4-18-12	Sec.	36	Twp.	28	Range	23	County	Ford	State	Ks	On Location		Finish	7:15 PM							
Lease	McCarty	Well No.	4-36			Location						Kingsdown 2N 1W 3/4 N W into										
Contractor	Duke 2				Owner						To Quality Well Service, Inc. You are hereby requested to rent cementing equipment and furnish cementer and helper to assist owner or contractor to do work as listed.											
Type Job	Surface				T.D.						652											
Hole Size	12 1/4				Depth						651.92											
Csg.	8 5/8				Depth						Charge To				Vincent oil							
Tbg. Size					Depth						Street											
Tool					Depth						City				State							
Cement Left in Csg.	42'				Shoe Joint						42.72				The above was done to satisfaction and supervision of owner agent or contractor.							
Meas Line					Displace						38.8				Cement Amount Ordered				230sx 65/35 6% Gel			
EQUIPMENT												3% CC 1/4 C.F. 100sx Common 2% gel 3% CC 1/4 C.F.										
Pumptrk	8	No.	Heath				Common						240									
Bulktrk	5	No.	Mike				Poz. Mix						90									
Bulktrk	9	No.	David				Gel.						14									
Pickup		No.					Calcium						12									
JOB SERVICES & REMARKS												Hulls										
Rat Hole												Salt										
Mouse Hole												Flowseal				82.5						
Centralizers												Kol-Seal				820B						
Baskets												Mud CLR				48						
D/V or Port Collar												CFL-117 or CD110 CAF				38						
												Sand										
Ran 15 jts 8 5/8 csg.												Handling				356						
												Mileage				50						
Est. circulation with mud pump.												FLOAT EQUIPMENT										
												Guide Shoe										
Mixed + pumped 230sx 65/35 6% gel												Centralizer										
3% CC 1/4 C.F. Tailed in with 100sx common												Baskets										
2% gel 2% CC 1/4 C.F. Displace with												AFU Inserts										
38.8 bbls H ₂ O Shut in 200 psi												Float Shoe										
												Latch Down										
Cement did circulate to surface												8 5/8 Wooden Plug										
												8 5/8 Baffle Plate										
												Pumptrk Charge				Surface						
												Mileage				50						
												Tax										
												Discount										
X Signature												Total Charge										

QUALITY WELL SERVICE, INC.

Federal Tax I.D. # 481187368

5480

Home Office 324 Simpson St., Pratt, KS 67124

Office / Fax 620-672-3663

Rich's Cell 620-727-3409
Brady's Cell 620-727-6964

Date	4-28-12	Sec.	36	Twp.	28	Range	23	County	Ford	State	Ks	On Location		Finish	8:00 pm
Lease	McCurty	Well No.	4-36		Location Kingsdown, KS 2 1/4 N 1 W 3/4 N										
Contractor	Duke 2				Owner										
Type Job	Rotary Plug				To Quality Well Service, Inc. You are hereby requested to rent cementing equipment and furnish cementer and helper to assist owner or contractor to do work as listed.										
Hole Size					T.D.	5300									
Csg.					Depth	Charge To Vincent Oil Corp.									
Tbg. Size					Depth	Street									
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	Cement Amount Ordered 200sx 60/40 4% Gel									
EQUIPMENT															
Pumptrk	8	No.	Heath		Common 120										
Bulktrk	9	No.	Lor.		Poz. Mix 80										
Bulktrk		No.			Gel. 7										
Pickup		No.			Calcium										
JOB SERVICES & REMARKS															
Rat Hole	30sx				Hulls										
Mouse Hole	20sx				Salt										
Centralizers					Flowseal 50										
Baskets					Kol-Seal										
D/V or Port Collar					Mud CLR 48										
					CFL-117 or CD110 CAF 38										
					Sand										
1 st Pumped	50sx 60/40 4% Gel @				Handling 207										
	1520'				Mileage 50										
FLOAT EQUIPMENT															
2 nd Pumped	80sx 60/40 4% Gel @				Guide Shoe										
	700'				Centralizer										
					Baskets										
3 rd Pumped	20sx 60/40 4% Gel @				AFU Inserts										
	60'				Float Shoe										
					Latch Down										
					8 5/8 Dry hole Plug										
					Pumptrk Charge Rotary Plug										
					Mileage 50										
					Tax										
					Discount										
					Total Charge										
X Signature	John Ambuster														