



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

KANSAS CORPORATION COMMISSION 1120360  
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.

5659

Federal Tax I.D. # 481187368

Home Office 324 Simpson St., Pratt, KS 67124

Heath's Cell 620-727-3410  
Office / Fax 620-672-3663

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

Date	2-13-12	Sec.	15	Twp.	34	Range	20	County	COMANCHE	State	K.S.	On Location	4pm	Finish	6:30pm
Lease	2-1 SLEET		Well No.		11-5		Location								
Contractor							Owner								
Type Job							To Quality Well Service, Inc.								
Hole Size							You are hereby requested to rent cementing equipment and furnish cementer and helper to assist owner or contractor to do work as listed.								
Csg.							Charge To								
Tbg. Size							Street								
Tool							City								
Cement Left in Csg.							The above was done to satisfaction and supervision of owner agent or contractor.								
Meas Line							Cement Amount Ordered								
<b>EQUIPMENT</b>							15 gal								
Pumptrk	5	No.						Common 10							
Bulktrk	7	No.						Poz. Mix 10							
Bulktrk		No.						Gel. 10							
Pickup		No.						Calcium							
<b>JOB SERVICES &amp; REMARKS</b>							Hulls								
Rat Hole							Salt								
Mouse Hole							Flowseal								
Centralizers							Kol-Seal								
Baskets							Mud CLR 48								
D/V or Port Collar							CFL-117 or CD110 CAF 38								
1st							Sand								
2nd							Handling 181								
3rd							Mileage 25								
<b>FLOAT EQUIPMENT</b>															
2-13-12							Guide Shoe								
1st							Centralizer								
2nd							Baskets								
3rd							AFU Inserts								
4th							Float Shoe								
5th							Latch Down								
6th							Pumptrk Charge -TH								
7th							Mileage								
8th							Tax								
9th							Discount								
10th							Total Charge								
Signature															

# QUALITY WELL SERVICE, INC.

5814

Federal Tax I.D. # 481187368

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Office / Fax 620-672-3663

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

Date <i>2-12-13</i>	Sec.	Twp.	Range	County	State	On Location	Finish
Lease		Well No.		Location			
Contractor				Owner			
Type Job				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.					
Csg. <i>55</i>		Depth		Charge To <i>201001</i>			
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			
<b>EQUIPMENT</b>							
Pumptrk <i>6</i> No.				Common			
Bulktrk No.				Poz. Mix			
Bulktrk No.				Gel. <i>1</i>			
Pickup No.				Calcium <i>1</i>			
<b>JOB SERVICES &amp; REMARKS</b>							
Rat Hole				Hulls			
Mouse Hole				Salt			
Centralizers				Flowseal			
Baskets				Kol-Seal			
D/V or Port Collar				Mud CLR 48			
				CFL-117 or CD110 CAF 38			
				Sand			
				Handling			
				Mileage <i>25</i>			
<b>FLOAT EQUIPMENT</b>							
				Guide Shoe			
				Centralizer			
				Baskets			
				AFU Inserts			
				Float Shoe			
				Latch Down			
				Pumptrk Charge			
				Mileage <i>25</i>			
						Tax	
						Discount	
<input checked="" type="checkbox"/> Signature						Total Charge	