



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

KANSAS CORPORATION COMMISSION 1124749
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.

5721

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	11-15-12	Sec.	30	Twp.	27	Range	23	County	Ford	State	KS	On Location		Finish	2:15					
Lease	Post	Well No.	1-30			Location Saddle Rd + 119RD 1 3/4 N west into														
Contractor	Duke 20					Owner														
Type Job	Surface					To Quality Well Service, Inc. You are hereby requested to rent cementing equipment and furnish cement and helper to assist owner or contractor to do work as listed.														
Hole Size	12 1/4					T.D.														
Csg.	8 5/8					Depth					436.					Charge To Vincent oil				
Tbg. Size						Depth										Street				
Tool						Depth										City State				
Cement Left in Csg.	15'					Shoe Joint										The above was done to satisfaction and supervision of owner agent or contractor.				
Meas Line						Displace										Cement Amount Ordered 300sx common 2% gel				
EQUIPMENT										3% cc 1/4" C.F.										
Pumptrk	8	No.	Cody			Common 300														
Bulktrk	10	No.	Mike			Poz. Mix														
Bulktrk		No.	David			Gel. 6														
Pickup		No.				Calcium 11														
JOB SERVICES & REMARKS										Hulls										
Rat Hole						Salt														
Mouse Hole						Flowseal 75														
Centralizers						Kol-Seal														
Baskets						Mud CLR 48														
D/V or Port Collar						CFL-117 or CD110 CAF 38														
Ran 10jts 8 5/8 csg.										Sand										
Established circulation with Mud Pump										Handling 317										
Mixed and pumped 300sx common										Mileage 60										
2% gel 3% cc 1/4 C.F. Displaced with										FLOAT EQUIPMENT										
26.8 Mts H ₂ O shut in 300psi.										Guide Shoe										
										Centralizer										
										Baskets										
										AFU Inserts										
Cement did circulate to surface										Float Shoe										
										Latch Down										
										8 5/8 wooden Plug										
										Pumptrk Charge Surface										
										Mileage 60										
																Tax				
																Discount				
																Total Charge				
X Signature																				

QUALITY WELL SERVICE, INC.

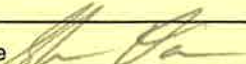
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Federal Tax I.D. # 481187368

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

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

Date	11-26-12	Sec.	30	Twp.	27	Range	23	County	Ford	State	KS	On Location		Finish	10:00-11:00
Lease	Rost	Well No.	1-30		Location Ford US 1 N 7 W 1 3/4 N Winto										
Contractor Duke # 20								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.				5177				Charge To Vincent Oil Corp			
Csg.				Depth				Street				City State			
Tbg. Size				Depth				City				State			
Tool				Depth				The above was done to satisfaction and supervision of owner agent or contractor.							
Cement Left in Csg.				Shoe Joint				Cement Amount Ordered				250 60/40 4% gel 1/4" Flt			
Meas Line				Displace											
EQUIPMENT															
Pumptrk	No.	8	Cody				Common				150				
Bulktrk	No.	9	Mike				Poz. Mix				100				
Bulktrk	No.		Heath				Gel.				9				
Pickup	No.						Calcium								
JOB SERVICES & REMARKS															
Rat Hole								30 sy							
Mouse Hole								20 sy							
Centralizers															
Baskets															
D/V or Port Collar															
1st Plug @ 1800								= 50 sy							
2nd plug @ 880								= 80 sy							
3rd plug @ 460								= 50 sy							
4th Plug @ 600								= 20 sy and wiper plug							
FLOAT EQUIPMENT															
Guide Shoe															
Centralizer															
Baskets															
AFU Inserts															
Float Shoe															
Latch Down															
								8 5/8 Dry hole plug							
Pumptrk Charge								PTA							
Mileage								60							
Thank You!!															
X Signature 												Tax			
												Discount			
												Total Charge			