



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

KANSAS CORPORATION COMMISSION 1130956
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.

324 Simpson St.
Pratt, KS 67124

Invoice

Date	Invoice #
3/25/2013	C-804

Bill To
VAL Energy Inc. Box 116 Wichita, KS 67201

P.O. No.	Terms	Lease Name
		Mills #1-29

Description	Qty	Rate	Amount
Common	95	15.50	1,472.50T
Poz	60	9.50	570.00T
Gel	20	20.50	410.00T
5 1/2 Rubber Plug	1	55.00	55.00T
Plug	1	950.00	950.00T
Handling	175	2.10	367.50T
.08 * sacks * miles	3,875	0.08	310.00T
LMV	25	2.00	50.00T
Pump Truck Mileage	25	8.00	200.00T
Discount	438.5	-1.00	-438.50T
Discount Expires after 30 days from the date of the invoice		0.00	0.00
Mills #1-29 Barber Co.			

Thank You for your business!	Subtotal	\$3,946.50
	Sales Tax (7.3%)	\$288.09
	Total	\$4,234.59

QUALITY WELL SERVICE, INC.

5663

Federal Tax I.D. # 481187368

Home Office 324 Simpson St., Pratt, KS 67124

Office : 620-727-3410
Office / Fax 620-672-3663

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

Date	3-21-13	Sec.	29	Twp.	31	Range	13	County	Barber	State	K.S.	On Location	5:30	Finish	4:30
Lease	Mills			Well No.	1299			Location	3 EAST LAKE CITY 3/4 S. 8 EAST SIDE						
Contractor	GWT							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	Plug							T.D.	4630						
Hole Size	7 1/8							Depth	4581						
Csg.	55							Depth							
Tbg. Size								Depth							
Tool								Shoe Joint							
Cement Left in Csg.								Displace	The above was done to satisfaction and supervision of owner agent or contractor.						
Meas Line								Cement Amount Ordered	155 SKS 6.4% 40%						
EQUIPMENT															
Pumptrk	No.							Common	15 gal						
Bulktrk	No.							Poz. Mix	95						
Bulktrk	No.							Gel.	15						
Pickup	No.							Calcium	20						
JOB SERVICES & REMARKS															
Rat Hole							Hulls								
Mouse Hole							Salt								
Centralizers							Flowseal								
Baskets							Kol-Seal								
D/V or Port Collar							Mud CLR 48								
1st plug 600' 15 gal							CFL-117 or CD110 CAF 38								
75 SKS 1 Rubber plug							Sand								
							Handling	175							
							Mileage	25							
FLOAT EQUIPMENT															
2nd plug 500' 10 SKS							Guide Shoe								
3rd plug 400' 10 SKS							Centralizer								
							Baskets								
Top off 10 SKS							AFU Inserts								
							Float Shoe								
							Latch Down								
							Pumptrk Charge	175							
							Mileage	25							
													Tax		
													Discount		
													Total Charge		
Signature															