



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

KANSAS CORPORATION COMMISSION 1131084
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.

5837

Federal Tax I.D. # 481187368

Home Office 324 Simpson St., Pratt, KS 67124

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

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

Date	3-1-12	Sec.	16	Twp.	34	Range	20	County	Comanche	State	KS	On Location		Finish	4:30	
Lease	Spt 701		Well No.	16-6		Location										
Contractor	Quality Well Service							Owner								
Type Job	PTH							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.							Charge To								
Csg.	5.5		Depth		Larson Engineering											
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 160 sy 60/40 4%								
EQUIPMENT										15 Gel on side						
Pumptrk	6	No.	Lack		Common 100											
Bulktrk	9	No.	Lack		Poz. Mix 60											
Bulktrk		No.			Gel 21											
Pickup		No.			Calcium											
JOB SERVICES & REMARKS										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								
										Sand						
1 st Pumped 15 sy Gel 50 sy cement @ 835'										Handling 181						
										Mileage 35						
FLOAT EQUIPMENT																
2 nd Pumped 20 ⁴⁰ sy cement @ 702'										Guide Shoe						
										Centralizer						
3 rd Pumped 50 sy cement @ 300'										Baskets						
										AFU Inserts						
4 th Pumped 20 sy cement @ 44' to surface										Float Shoe						
										Latch Down						
										S.S. Rubber Plug						
										Pumptrk Charge PTA						
										Mileage 35						
										Tax						
										Discount						
										Total Charge						
X Signature																

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Date	2-28-13	Sec.	14	Twp.	34	Range	20	County	Comanche	State	KS	On Location	Finish
Lease	Selzer	Well No.	116-6	Location									
Contractor	Quality Well Service							Owner					
Type Job	Pumped Bottom							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.							Charge To Larson Engineering					
Csg.	5.5							Depth					
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 30 sx 60/40 4%					
EQUIPMENT													
Pumptrk	6	No.					Common 20						
Bulktrk	9	No.	M.F.C.				Poz. Mix 10						
Bulktrk		No.					Gel. 1						
Pickup		No.					Calcium 1						
JOB SERVICES & REMARKS													
Rat Hole								Hulls 200 #					
Mouse Hole								Salt					
Centralizers								Flowseal					
Baskets								Kol-Seal					
D/V or Port Collar								Mud CLR 48					
								CFL-117 or CD110 CAF 38					
								Sand					
	1 st Pumped 30sx cement 200# Hulls							Handling 32					
	down 5.5 Csg Displaced with							Mileage 35					
	98.8blt 26 sp + in 200px							FLOAT EQUIPMENT					
								Guide Shoe					
								Centralizer					
								Baskets					
								AFU Inserts					
								Float Shoe					
								Latch Down					
								Pumptrk Charge Pumped Bottom					
								Mileage 35					
								Tax					
								Discount					
								Total Charge					
X Signature													