



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

KANSAS CORPORATION COMMISSION 1150122
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.

(Print Name) Employee of Operator or Operator on above-described well,

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



CONSOLIDATED
Oil Well Services, LLC

TICKET NUMBER 43014
LOCATION Eureka
FOREMAN Steve Mead

PO Box 884, Chanute, KS 66720
620-431-9210 or 800-467-8676

FIELD TICKET & TREATMENT REPORT

CEMENT APT 15-111-20477

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
6-26-13		Treas # 1-21	21	21S	12E	Lyon
CUSTOMER <u>Quial Oil & Gas LLC</u>			TRUCK #		DRIVER	
MAILING ADDRESS <u>525 Industrial Dr. P.O. Box K</u>			485		Alon M	
CITY <u>Garden City</u>			667		Chris B	
STATE <u>KS</u>			ZIP CODE <u>67846</u>			

JOB TYPE Surface HOLE SIZE 12 1/4 HOLE DEPTH 128' CASING SIZE & WEIGHT 5 5/8
 CASING DEPTH 123' DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT _____ SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING 10'
 DISPLACEMENT 7 bbls DISPLACEMENT PSI _____ MIX PSI _____ RATE _____

REMARKS: Safety meeting. Rig up to 8 5/8 casing. Break circulation by Fresh water. Mix 90 sks Class A Cement by 3% CaCl2, 2% Gel & 1/4" Flo-Cole. Displace with 7 bbls Fresh water. Shut well in. Good cement returns to surface 7 bbls. Job complete Rig down

Thank you

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
54015	1	PUMP CHARGE	870.00	870.00
5406	35	MILEAGE	4.20	147.00
11045	90 sks	Class A Cement	15.70	1413.00
1102	250 ^{lb}	CaCl2 3%	.78	195.00
111813	170 ^{lb}	Gel 2%	.22	37.40
1107	22 ^{lb}	Flo-Cole 1/4"	2.47	54.34
5407	4.23 Ton	Ton mileage Bulk Truck	M/C	368.00
			Subtotal	3084.74
			7.3% SALES TAX	124.08
			ESTIMATED TOTAL	3208.82

Ravin 3737
 AUTHORIZATION Daron Patten TITLE _____ DATE _____

I acknowledge that the payment terms, unless specifically amended in writing on the front of the form or in the customer's account records, at our office, and conditions of service on the back of this form are in effect for services identified on this form.