



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

KANSAS CORPORATION COMMISSION 1155082
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.

5869

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	4-16-13	Sec.	4	Twp.	23	Range	29	County	Finnel	State	Ks	On Location	10:45PM	Finish	3:00 AM
Lease	THIESSEN		Well No.	1-4		Location GAROEN C.H. KJ 156 & 23 3W 2N									
Contractor	VAL #1							Owner Einto							
Type Job	SURFACE							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	12 1/4		T.D.	468		Charge To Vincent Oil Corp									
Csg.	35/3 23"		Depth	467		Street									
Tbg. Size			Depth			City									
Tool			Depth			State									
Cement Left in Csg.			Shoe Joint	30		The above was done to satisfaction and supervision of owner agent or contractor.									
Meas Line			Displace			Cement Amount Ordered 275 50 Common									
EQUIPMENT													20/6 FEL 3/8 CC 1/4" CF		
Pumptrk	8	No.	MIKE				Common 275								
Bulktrk	7	No.	DEREK				Poz. Mix								
Bulktrk		No.					Gel. 5								
Pickup		No.	TODD				Calcium 10								
JOB SERVICES & REMARKS													Hulls		
Rat Hole													Salt		
Mouse Hole													Flowseal 68.75 lbs		
Centralizers													Kol-Seal		
Baskets													Mud CLR 48		
D/V or Port Collar													CFL-117 or CD110 CAF 38		
Run 12 JH'S 23' Csg													Sand		
SCT @ 467													Handling 290		
Mix & Pump 275 50 Common													Mileage 75		
20/6 FEL 3/8 CC 1/4" CF													FLOAT EQUIPMENT		
15# GAL 1.36 H ³													Guide Shoe		
SHUT DOWN RELEASE													Centralizer		
35/8 WOODEN PLS													Baskets		
													AFU Inserts		
													Float Shoe		
													Latch Down		
Disp 23.2 Bbl total													25/8 WOODEN PLG		
PROG CIRC THRU JOB													LMU 75 miles		
CIRC CNT TO PIT													Pumptrk Charge SURFACE		
THANKS													Mileage 75		
TODD MIKE DEREK															
PLEASE CALL APPROX															
Signature <i>[Signature]</i>													Tax		
													Discount		
													Total Charge		

QUALITY WELL SERVICE, INC.

5873

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	4-24-13	Sec.	4	Twp.	23	Range	29	County	Finney	State	Ks	On Location	4:15 P.M.	Finish	7:30 P.M.
Lease	THIESSEN		Well No.	1-4		Location 23E56 Jct 3W 2N E1/4									
Contractor	OAI #1							Owner							
Type Job	PTA							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	7 7/8		T.D.												
Csg.	4 1/2 D.P		Depth					Charge To Vincent Oil Corp							
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 250 sx 60/40									
EQUIPMENT													40% GEL 1/4 CF		
Pumptrk	3	No.	M.KE		Common 150										
Bulktrk	9	No.	DEEEL		Poz. Mix 100										
Bulktrk		No.			Gel. 9										
Pickup		No.	TOOO		Calcium										
JOB SERVICES & REMARKS													Hulls		
Rat Hole	30 sx		Salt												
Mouse Hole	20 sx		Flowseal 62.5												
Centralizers	Kol-Seal														
Baskets	Mud CLR 48														
D/V or Port Collar	CFL-117 or CD110 CAF 38														
Sand															
1st Plug 1390' 50sx 60/40 40% GEL										Handling 259					
Disp H2O										Mileage 75					
FLOAT EQUIPMENT															
2nd Plug 1050' 80sx 60/40 40% GEL										Guide Shoe					
Disp H2O										Centralizer					
Baskets															
3rd Plug 510' 50sx 60/40 40% GEL										AFU Inserts					
Disp H2O										Float Shoe					
Latch Down															
4th Plug 60' 20sx 60/40 40% GEL										LMU 75					
										Pumptrk Charge PTA					
										Mileage 75					
Tax															
Discount															
Total Charge															
X Signature	[Handwritten Signature]														