

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

the same are true and correct, so help me God.

KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

1159065

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 #:				API No. 15		
Name:				Spot Description:		
Address 1:				Sec Twp S. R East West		
Address 2:				Feet from North / South Line of Section		
City:				Feet from East / West Line of Section		
Contact Person:				Footages Calculated from Nearest Outside Section Corner:		
Phone: ()				NE NW SE SW		
Type of Well: (Check one) Oil Well Gas Well OG D&A Cathodic						
Water Supply Well	SWD Permit #:					
ENHR Permit #:	orage Permit #:		Date Well Completed:			
Is ACO-1 filed? Yes No If not, is well log attached? Yes No				The plugging proposal was approved on: (Date)		
Producing Formation(s): List All (If needed attach another sheet)				by:(KCC District Agent's Name)		
Depth to Top: Bottom: T.D				Plugging Commenced:		
Depth	om: T.D		Plugging Completed:			
Depth	to Top: Botto	om:T.D		g Completed		
Show depth and thickness o	of all water, oil and gas form	ations.				
Oil, Gas or Water Records			Casing Record (Su	ing Record (Surface, Conductor & Production)		
Formation	Content	Casing	Size	Setting Depth	Pulled Out	
ement or other plugs were	used, state the character of	f same depth placed from (bot	ttorn), to (top) for ea	cn plug set.		
Plugging Contractor License #:						
Address 1:			Address 2:			
City:			State:			
Phone: ()						
Name of Party Responsible	for Plugging Fees:					
State of County,			, SS.			
			F	mplovee of Operator or	Operator on above-described well,	
	(Print Name)				operate. on above accombod well,	

Submitted Electronically

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

QUALITY OILWELL CEMENTING, INC

Federal Tax I.D.# 20-288610

Phone 785-483-2025

Home Office P.O. Box 32 Russell, KS 67665

No. 692

Cell 785-324-1041 Finish On Location State Range County Twp. Sec. Date Location Well No. 1-2 Owner To Quality Oilwell Cementing, Inc. You are hereby requested to rent cementing equipment and furnish cementer and helper to assist owner or contractor to do work as listed. Charge T.D. 3620 To Hole Size Street Depth Csg State City Depth Tbg. Size The above was done to satisfaction and supervision of owner agent or contractor. Depth Tool Cement Amount Ordered Shoe Joint Cement Left in Csg Displace Meas Line EQUIPMENT. Common Cemente Poz. Mix Helper Pumptrk Driver No. Gel Bulktrk Driver Driver No. Calcium Bulktrk Driver Hulls JOB SERVICES & REMARKS Salt Remarks: Flowseal 305K Rat Hole Kol-Seal Mouse Hole 1 55K Mud CLR 48 Centralizers CFL-117 or CD110 CAF 38 **Baskets** Sand D/V or Port Collar Handling Mileage FLOAT EQUIPMENT Guide Shoe Centralizer Baskets **AFU Inserts** Float Shoe Latch Down Pumptrk Charge Mileage Tax Discount Total Charge