



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

KANSAS CORPORATION COMMISSION 1170147
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 OILWELL CEMENTING, INC.

Federal Tax I.D.# 20-2886107

Phone 785-483-2025
Cell 785-324-1041

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

No. 6879

Date	Sec.	Twp.	Range	County	State	On Location	Finish
8-25-13	34	17	14	Barton	KS		1:15 PM

Location *1 N of Boid Wn 2*

Lease <i>k-F Unit</i>	Well No. <i>1-34</i>	Owner
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Contractor <i>sterling 5</i>	To Quality Oilwell Cementing, Inc.
Type Job <i>Surface</i>	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 <i>1 2 1/4</i>	T.D. <i>826</i>	Charge To <i>Shelby Resources</i>
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Csg. <i>8 5/8</i>	Depth <i>821.64</i>	Street
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Tbg. Size	Depth	City	State
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Tool	Depth	The above was done to satisfaction and supervision of owner agent or contractor.
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Cement Left in Csg.	Shoe Joint <i>42.32</i>	Cement Amount Ordered <i>375 3/4 3%cc 2%gel</i>
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Meas Line	Displace <i>49 1/2 bbl</i>	
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EQUIPMENT

Pumptrk <i>5</i>	No.	Cementer Helper <i>Matt</i>	Common <i>225</i>
Bulktrk <i>12</i>	No.	Driver <i>Heath</i>	Poz. Mix <i>150</i>
Bulktrk <i>P4</i>	No.	Driver <i>Travis</i>	Gel. <i>1</i>
			Calcium <i>18</i>

JOB SERVICES & REMARKS

Remarks: <i>Cement did Circulate</i>	Hulls
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Rat Hole	Salt
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Mouse Hole	Flowseal
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Centralizers	Kol-Seal
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Baskets	Mud CLR 48
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D/V or Port Collar	CFL-117 or CD110 CAF 38
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	Sand
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	Handling <i>389</i>
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	Mileage
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FLOAT EQUIPMENT

	Guide Shoe <i>1</i>
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	Centralizer
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	Baskets
--	---------

	AFU Inserts
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	Float Shoe
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	Latch Down
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	<i>1 battal Plate</i>
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	<i>1 Rubber Plug</i>
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	Pumptrk Charge <i>Long Surface</i>
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	Mileage <i>18</i>
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	Tax
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	Discount
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	Total Charge
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X Signature *Alan Loffe*

QUALITY OILWELL CEMENTING, INC.

Federal Tax I.D.# 20-2886107

Phone 785-483-2025
Cell 785-324-1041

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

No. 7763

Date	9-1-13	Sec.	34	Twp.	17	Range	14	County	Barton	State	Ks	On Location		Finish	6:30 AM	
Lease	K-F unit							Well No.	1-34	Owner	Russell Ks - 5 to 281 + 4 Hwy Jet					
Contractor	Sterling		#5		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.											
Type Job	Plug		Charge To Shelby Resources													
Hole Size	7 7/8"		T.D.	3430'												
Csg.			Depth													
Tbg. Size	4 1/2" D.P.		Depth													
Tool			Depth	The above was done to satisfaction and supervision of owner agent or contractor.												
Cement Left in Csg.			Shoe Joint	Cement Amount Ordered 225 SX 60140 4% Gel 1/4#												
Meas Line			Displace	H2O/mud		Flo-seal										
EQUIPMENT				Common 135												
Pumptrk	16	No.	Cementer	Billy		Poz. Mix 90										
Bulktrk	13	No.	Driver	Lonnie		Gel. 8										
Bulktrk	P.U.	No.	Driver	Rick		Calcium										
JOB SERVICES & REMARKS				Hulls												
Remarks:	Salt															
Rat Hole	Flowseal 50ft															
Mouse Hole	Kol-Seal															
Centralizers	Mud CLR 48															
Baskets	CFL-117 or CD110 CAF 38															
D/V or Port Collar	Sand															
	Handling 233															
	Mileage															
FLOAT EQUIPMENT				Guide Shoe												
Cement did Circulate				Centralizer												
Quality Oilwell Cementing				Baskets												
Cementing				AFU Inserts												
1 - Dry hole plug				Float Shoe												
plug				Latch Down												
18 plug				Pumptrk Charge												
18 plug				Mileage												
												Tax				
												Discount				
												Total Charge				
Signature <i>Alan Foster</i>																