



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

KANSAS CORPORATION COMMISSION 1175397
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

QUALITY WELL SERVICE, INC.

Federal Tax I.D. # 481187368

5266

Home Office 324 Simpson St., Pratt, KS 67124

Todd's Cell 620-388-5422
Office / Fax 620-672-3663

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

Date	7-15-11	Sec.	36	Twp.	26	Range	17	County	EDWARDS	State	Ks	On Location		Finish	7:30								
Lease	CROCKET	Well No.	9-36		Location		Hartland Ks N to Colton																
Contractor	Mallard Oels				Owner		LW Winn Oels																
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.		451		Charge To																
Csg.	3 3/8 23'		Depth		451		Vincent O.L.																
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		27.6 Bbls		Cement Amount Ordered				450 sq 60/40												
EQUIPMENT												2 1/2 GEL 3 1/2 CL 1/4" CF											
Pumptrk	3	No.	13002				Common																
Bulktrk	5	No.	TODD				Poz. Mix																
Bulktrk		No.					Gel.																
Pickup		No.	DRAIN				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											
Run 11 H.S. 3 3/8 23'												Sand											
												Handling											
MTA Pump 450 x 60/40												Mileage				30							
2 1/2 GEL 3 1/2 CL 1/4" CF												FLOAT EQUIPMENT											
14.7 1/2 x 1.25 #13												Guide Shoe											
												Centralizer											
SHUT DOWN RELEASE PLOGS												Baskets											
												AFU Inserts											
Drops 27.6 Bbls total												Float Shoe											
Close Valve on Csg 200'												Latch Down											
Plug down @ 7:00																							
Good cove this job												Pumptrk Charge				Surface							
CSC CNT TO P.T												Mileage				30							
Thank Todd & Brady Signature: <i>[Signature]</i>																Tax							
																Discount							
																Total Charge							

QUALITY WELL SERVICE, INC.

Federal Tax I.D. # 481187368

5272

Home Office 324 Simpson St., Pratt, KS 67124

Todd's Cell 620-388-5422
Office / Fax 620-672-3663

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

Date	7-23-11	Sec.	36	Twp.	26	Range	17	County	EDWARDS	State	Ks	On Location		Finish	11:00
Lease	Crocket	Well No.	9-36			Location						Hawland Ks N to G/line			
Contractor	Mallard Oils.				Owner				I W W: N into						
Type Job	PTM				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.		4613		Charge To				VINCENT O.L				
Csg.	Depth				Street										
Tbg. Size	Depth				City				State						
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				170 x 60/40						
EQUIPMENT												4% GEL			
Pumptrk	3	No.						Common	102						
Bulktrk	4	No.						Poz. Mix	63						
Bulktrk		No.						Gel.	6						
Pickup		No.						Calcium							
JOB SERVICES & REMARKS															
Rat Hole	30 x 60/40 4% GEL				Hulls										
Mouse Hole	20 x 60/40 4% GEL				Salt										
Centralizers					Flowseal										
Baskets					Kol-Seal										
D/V or Port Collar					Mud CLR 48										
1st Plug	1100'				CFL-117 or CD110 CAF 38										
	50 x 60/40 4% GEL				Sand										
	DISP w/H ₂ O				Handling				176						
												Mileage		30	
FLOAT EQUIPMENT															
2nd Plug	420'				Guide Shoe										
	50 x 60/40 4% GEL				Centralizer										
	DISP w/H ₂ O				Baskets										
												AFU Inserts			
3rd Plug	60'				Float Shoe										
	20 x 60/40 4% GEL				Latch Down										
												Pumptrk Charge		PTA	
												Mileage		30	
												Tax			
												Discount			
												Total Charge			
Signature: <i>[Signature]</i> Thanks Todd = BRADY PLEASE CALL AGAIN															

Vincent Oil Corporation records reflect that the original paper form of this CP-4 document for the Crockett #9-36 was filed with the KCC on 11/10/2011

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**KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION
WELL PLUGGING RECORD
K.A.R. 82-3-117**

Form CP-4
March 2009
**Type or Print on this Form
Form must be Signed
All blanks must be Filled**

OPERATOR: License #: 5004
 Name: Vincent Oil Corporation
 Address 1: 155 N. Market, Ste 700
 Address 2: _____
 City: Wichita State: KS Zip: 67202 + 1821
 Contact Person: M.L. Korphage
 Phone: (316) 262-3573
 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. 4618'
 _____ Depth to Top: _____ Bottom: _____ T.D. _____
 _____ Depth to Top: _____ Bottom: _____ T.D. _____

API No. 15 - 047-21599-00-00
 Spot Description: S/2-S/2-N/2-NE
 -S/2- S/2, N/2, NE Sec. 36 Twp. 26 S. R. 17 East West
1,200 Feet from North / South Line of Section
1,320 Feet from East / West Line of Section
 Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
 County: Edwards
 Lease Name: Crockett Well #: 9-36
 Date Well Completed: 7/22/2011
 The plugging proposal was approved on: 7/22/2011 (Date)
 by: Eric MacLaren, KCC Dist. I (KCC District Agent's Name)
 Plugging Commenced: 7/23/2011
 Plugging Completed: 7/23/2011

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
		Surface Casing	8.625"	451'	None

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.

Loaded hole with rotary mud and set cement plugs through drill pipe as follows:
 50 sx plug at 1110', 50 sx plug at 480', 20 sx plug at 60' to surface; plugged rathole with 30 sx and mousehole with 20 sx; Used a total of 170 sx of 60 /40 POZ (4% Gel); cementing by Quality Well Service (Ticket # 5272), plug down at 11:00 AM 7/23/2011

Plugging Contractor License #: 4958 Name: Mallard JV Inc.
 Address 1: 2080 E. Kansas Ave. Address 2: _____
 City: McPherson State: Kansas Zip: 67460 + _____
 Phone: (620) 241-4640

Name of Party Responsible for Plugging Fees: Vincent Oil Corporation 155 N. Market, Ste 700, Wichita, Kansas 67202
 State of Kansas County, Sedgwick, ss.

M.L. Korphage 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.

Signature: M.L. Korphage