



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

KANSAS CORPORATION COMMISSION 1245861
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. 1096

Date	3-11-15	Sec.	3	Twp.	17	Range	15	County	Barton	State	Kansas	On Location		Finish	2:30 PM
Lease								Well No.		Owner					
STEINERT "D"								#1		To Quality Oilwell Cementing, Inc.					
Contractor								You are hereby requested to rent cementing equipment and furnish cementer and helper to assist owner or contractor to do work as listed.							
DS & W Well Service															
Type Job								Charge To							
Plug ABANDONED Well								H.-D. Exploration							
Hole Size				T.D.				Street							
5 1/2															
Csg.				Depth				City				State			
5 1/2				3464											
Tbg. Size				Depth				The above was done to satisfaction and supervision of owner agent or contractor							
2 3/8				503'											
Tool				Depth				Cement Amount Ordered				400 sx. 60% 42 Gel (305 sx)			
4 5/8				503'											
Cement Left in Csg.				Shoe Joint				Cement Amount Ordered				400 sx. 60% 42 Gel (305 sx)			
Meas Line				Displace				1# gel on side of 300# Hulls							
EQUIPMENT															
Pumptrk		No.		Cement		Rick #		Common							
18				Helper		Glen G.		183							
Bulktrk		No.		Driver		Cody G.		Poz. Mix							
4				Driver		Doug G.		122							
Bulktrk		No.		Driver				Gel.							
				Driver				23							
				Driver				Calcium							
JOB SERVICES & REMARKS															
Remarks:								Hulls							
Perf @ 475, 1000, 1500								300# (6)							
Rat Hole								Salt							
Mouse Hole								Flowseal							
Centralizers								Kol-Seal							
Baskets								Mud CLR 48							
D/V or Port Collar								CFL-117 or CD110 CAF 38							
2 3/8 Tubing @ 3970' - Spot 13 gel, 50								Handling							
sx Cement w/ 100 # Hulls.								400							
2 3/8 Tubing @ 1500' - Spot 100 sx Cement								Mileage							
w/ 100 # Hulls.								FLOAT EQUIPMENT							
2 3/8 Tubing @ 500' CIRCULATED								Guide Shoe							
Cement to Surface w/ 55 sx. &								Centralizer							
100 # Hulls. Pulled 2 3/8.								Baskets							
PUT ON 5 1/2 swage & MIXED								AFU Inserts							
ANOTHER 100 SX Cement &								Float Shoe							
Cement CIRCULATED, AROUND								Latch Down							
ANNULAS. - SHUT IN;								Pumptrk Charge							
5 1/2 + ANNULAS VALVES								Mileage							
THANKS								25 Plug							
Signature								Tax							
G. Akatz								Discount							
								Total Charge							