



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

KANSAS CORPORATION COMMISSION 1257077
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 #: _____
 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

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

No. 1431

Cell 785-324-1041

Date	Sec.	Twp.	Range	County	State	On Location	Finish
7-2-15	10	10	15	Osborne	KS		11:30AM

Location *Natoma E side, 1N, E to curve*

Lease	Well No.	Owner	
<i>Hogan</i>	<i>2</i>	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.	
Contractor		Charge To	
<i>Fischer</i>		<i>Tengasco</i>	
Type Job		Street	
<i>Plug</i>			
Hole Size	T.D.	City	
		State	
Csg.	Depth	The above was done to satisfaction and supervision of owner agent or contractor.	
<i>4 1/2</i>			
Tbg. Size	Depth	Cement Amount Ordered	
<i>2</i>		<i>350sx 6% 40, 4% gel</i>	
Tool	Depth	Cement Left in Csg.	
Meas Line	Displace	500 # Hulls on the side	

EQUIPMENT

Pumptrk	No.	Cementor		Common
<i>17</i>		Helper		Poz. Mix
Bulktrk	No.	Driver		Gel.
<i>19</i>		Driver		Calcium
Bulktrk	No.	Driver		
<i>PU</i>		Driver		

JOB SERVICES & REMARKS

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
<i>50sx and 200 # Hulls at 3520</i>	Sand
	Handling
	Mileage

FLOAT EQUIPMENT

<i>100sx and 200 # Hulls at 3760</i>	Guide Shoe
<i>90sx to circulate at 1380</i>	Centralizer
	Baskets
<i>25sx on surface pipe at 300 psi</i>	AFU Inserts
	Float Shoe
<i>25sx to top off 4 1/2 at 300 psi</i>	Latch Down

	Pumptrk Charge	Tax
	Mileage	Discount
		Total Charge
X Signature <i>Allen Hammer</i>		