

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

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

1271541

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 OILWELL CEMENTING, INC.

Federal Tax I.D.# 20-2886107

Phone 785-483-2025

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

No. 1855

Cell 785-324-1041

Date <u>10-30-15</u>	Sec.	Twp.	Range	County <u>Russell</u>	State <u>KS</u>	On Location	Finish <u>12:00 PM</u>
Lease <u>Staudinger</u>				Well No. <u>H3</u>	Owner <u>E to 199 1/2 S Winto</u>		
Contractor <u>Super Well</u>				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 <u>Plug</u>				Charge To <u>H-D Exploration</u>			
Hole Size <u>4 1/2</u>	T.D.			Street			
Csg. <u>2</u>	Depth			City	State		
Tbg. Size	Depth			The above was done to satisfaction and supervision of owner agent or contractor.			
Tool	Depth			Cement Amount Ordered <u>350 80/40 40/60</u>			
Cement Left in Csg.	Shoe Joint			Used <u>260</u>			
Meas Line	Displace			Common <u>156</u>			
EQUIPMENT				Poz. Mix <u>104</u>			
Pumptrk <u>18</u> No.	Cementer			Gel. <u>9</u>			
Bulktrk <u>4</u> No.	Helper <u>Vick</u>			Calcium			
Bulktrk <u>PU</u> No.	Driver <u>Doug</u>			Hulls <u>4</u>			
Bulktrk <u>PU</u> No.	Driver <u>Brett</u>			Salt			
JOB SERVICES & REMARKS				Flowseal			
Remarks:				Kol-Seal			
Rat Hole				Mud CLR 48			
Mouse Hole				CFL-117 or CD110 CAF 38			
Centralizers				Sand			
Baskets				Handling <u>350</u>			
D/V or Port Collar				Mileage			
<u>1st Plug @ 2920 w/ 100 sk + 200 sk</u>				FLOAT EQUIPMENT			
<u>2nd Plug @ 1900 w/ 45 sks</u>				Guide Shoe			
<u>3rd Plug @ 750 w/ 35 sks</u>				Centralizer			
<u>4th Plug @ 250 w/ 75 sks</u>				Baskets			
<u>Top off w/ 5 sks</u>				AFU Inserts			
				Float Shoe			
				Latch Down			
				Pumptrk Charge <u>plug</u>			
				Mileage <u>21</u>			
				Tax			
				Discount			
				Total Charge			
X Signature <u>Gi. M. H. H.</u>							