

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

the same are true and correct, so help me God.

KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

12/4268

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 #:					API No. 15				
Name:					Spot Description:				
Address 1:					Sec Twp S. R East West				
Address 2:					Feet from North / South Line of Section				
City:					Feet from East / West Line of Section				
Contact Person:					Footages Calculated from Nearest Outside Section Corner:				
Phone: ()				□ NE □ NW □ SE □ SW					
Type of Well: (Check one)	Oil Well Gas Well	OG D&A Cathoo	dic	County:					
Water Supply Well	Other:	SWD Permit #:		Lease Name: Well #:					
ENHR Permit #:	Gas	Storage Permit #:		Date Well Completed:					
Is ACO-1 filed? Yes	No If not, is	well log attached? Yes	No	The plugging proposal was approved on: (Date)					
Producing Formation(s): List	All (If needed attach and	other sheet)		by: (KCC District Agent's Name)					
Depth	to Top: E	Bottom: T.D		Plugging Commenced:					
Depth	to Top: E	Bottom: T.D							
Depth		Bottom:T.D		Plugging Completed:					
Show depth and thickness o	f all water, oil and gas f	ormations.							
Oil, Gas or Wate	er Records		Casing R	ecord (Sur	face, Conductor & Prod	luction)			
Formation	Content	Casing	Size		Setting Depth	Pulled Out			
		lugged, indicating where the mu er of same depth placed from (bo							
Plugging Contractor License #:									
Address 1:			_ Address	2:					
City:				State:		Zip:	_+		
Phone: ()									
Name of Party Responsible	for Plugging Fees:								
State of	County,			_ , SS.					
					nployee of Operator o	r Operator on above	-described well		
	(Print Nam			_ <u> </u>	inhioyee of Operator o	Detator on above	-uescribed well,		

Submitted Electronically

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

QUALITY WELL SERVICE, INC. Federal Tax I.D. # 481187368

6122

Home Office 324 Simpson St., Pratt, KS 67124

Office 620-727-3410 Fax 620-672-3663

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

Date //-/8-/5 Sec. 15	THE STATE OF	Range Z I	634000000000000000000000000000000000000	County ev K	State K 5	On Location	Finish			
Lease Britiman	Well No. 15-2	L-L	Location	on						
Contractor Quil, Well		Owner								
Type Jobseph Som / PTA			To Quality Well Service, Inc. You are hereby requested to rent cementing equipment and furnish							
Hole Size	T.D.	T.D.		cementer and helper to assist owner or contractor to do work as listed.						
Gsg. 5.5	Depth	Depth			Charge R+B					
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			Cement Amount Ordered 160s1 60/40 47 601						
EQUIP		12 si get un side = -								
Pumptrk 8 No				Common //						
Bulktrk 9 No. 19-11				Poz. Mix 60						
Bulktrk No.			ver his fly	Gel. 18						
Pickup No.				Calcium						
JOB SERVICES	8 & REMARKS			Hulls 150 #						
Rat Hole				Salt						
Mouse Hole				Flowseal						
Centralizers		31.25		Kol-Seal						
Baskets				Mud CLR 48						
D/V or Port Collar 11-18-1.				CFL-117 or CD110 CAF 38						
pringed 2551	5 15	outh	ala	Sand						
solut in 150	iο ∦			Handling 181						
11-18-15				Mileage 65						
				FLOAT EQUIPMENT						
11-19-15		er yezh e eo e yezhoù eo e e e e e e e e e e e e e e e e e		Guide Shoe						
pulled to 1180	p 110 p 0	£ 12	gdL	Centralizer						
50 5K5 60140 42 611.				Baskets						
parked to 640	peringer	L 50	515	AFU Inserts						
sculled to 40' punal to 5K5				Float Shoe						
				Latch Down						
<u> </u>	77	5 5K:		LMV	65					
. (†				Service	Sugaractur					
			3.00		rge Ampril Botten 1	PTA ZWYW	Lup Chrisen			
			42 (19 6)		5x Z	\$				
						Tax				
						_f Discount				
X Signature		Total Charge								