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

1278185

March 2009 Type or Print on this Form Form must be Signed All blanks must be Filled

Form CP-4

WELL PLUGGING RECORD K.A.R. 82-3-117

OPERATOR: License #:	API No. 15
Name:	Spot Description:
Address 1:	
Address 2:	Feet from North / South Line of Section
City: State: Zip: +	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 Cathodic Water Supply Well Other: SWD Permit #: SWD Permit #: SWD Permit #: ENHR Permit #: Gas Storage Permit #: Gas Storage Permit #: SWD Permit #: SWD 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) Storm: T.D. Storm: T.D. Depth to Top: Bottom: T.D. Storm: T.D.	County: Well #: Lease Name: Well #: Date Well Completed: The plugging proposal was approved on: (<i>Date</i>) by: (<i>KCC District Agent's Name</i>) Plugging Commenced: Plugging Completed:
Depth to Top: Bottom: T.D	

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	g Fees:		
State of	County,	, SS.	
	(Print Name)		or or Operator on above-described well
haing first duly sugar an asthe says. The	at I have knowledge of the factor	totomonto, and mottors harain contained, and the la	a of the choice described well is so filed on

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

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

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

6452

Sec.	Twp. Range	C	ounty	State	On Location	Finish	
Date 010816 28	275 04E	But	IER	KS	8:15 Am	-10-20 AV	
Lease CRR+OR W	Vell No. 3	Locatio	n Avaus	ats this	slinto		
Contractor Cyclone W/S			Owner Te	Pe aild6	25		
Type Job of & Hole Plue			To Quality Well Service, Inc. – You are hereby requested to rent cementing equipment and furnish				
Hole Size	T.D.	n da	cementer and helper to assist owner or contractor to do work as listed.				
Csg. 15 +85/ +5/ +23/	Depth 250'		Charge To To Pe				
Tbg. Size	Depth	- 6	Street				
Tool	Depth	Death			State		
Cement Left in Csg.	Shoe Joint		The above was done to satisfaction and supervision of owner agent or			agent or contractor.	
Meas Line	Displace		Cement Amount Ordered 265x60:40:42				
ĘQUIPM	IENT					.,,	
Pumptrk & No. Mike B			Common (0			
Bulktrk 5 No. Derek B	3		Poz. Mix / ()	5			
Bulktrk No.			Gel. 9				
Pickup No. Douidt			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				
tubing Sotat 251	2' Mix 230s	X	Sand				
coment Pull tubing	, Swedne in	to	Handling 2"	74			
S/ mix 255x con	ment Didcin	culate	Mileage 20	0			
-/ -/ -/ -/ -/ -/ -/ -/ -/ -/ -/ -/ -/ -		Į.		FLOAT EQUIPME	INT		
			Guide Shoe			f f the sector	
			Centralizer				
	5 \$ 1.5r		Baskets				
			AFU Inserts				
			Float Shoe				
			Latch Down				
			LANV	20			
			Service				
			Pumptrk Char			A	
NH	and the second second			0 × 7			
AHTIV/		-			Tax		
					Discount	- Apr	
X Signature					Total Charge		