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

1321148

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:	Sec Twp S. R East West
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 #: Is ACO-1 filed? Yes No If not, is well log attached? Yes No	County: Well #: Uell #: Date Well Completed: The plugging proposal was approved on: (Date)
Producing Formation(s): List All (If needed attach another sheet)	by: (KCC District Agent's Name)
Depth to Top: Bottom: T.D	Plugging Commenced:
Depth to Top: Bottom: T.D	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	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	r 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.



TICKET 2803

1023 Reservation Road • I	Hays, Kansas 67	601 • (785) 625-1182
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guarante	e uncertain conditio e the results of their	services and wil	l not be held re	sponsible for per	sona	al or property dan	nage in the pe	erformance	e of their service	es.	-
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as shot w	ere approved. certifies that it has								-		
, and suita	ble conditions for th	e performance o	f said work.								

/6)

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

6563

	Sec.	Twp.	Range		County	State	On Location	Finish		
Date 10-17 11,	D. A	12 Aud	13	Sta	110,0	KS	COO	9.15		
Lease Richard son)	N	Vell No.		Locati		A The lange	13 H 12	S. A. Cont		
Contractor Chec R	GC VC			· · · ·	Owner	a1	1	the Area		
Type Job (77)					To Quality Well Service, Inc. You are hereby requested to rent cementing equipment and furnish					
Hole Size	e. •	T.D.			cementer an	id helper to assist ow	ner or contractor to d	o work as listed.		
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