

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

KANSAS CORPORATION COMMISSION 1353480
 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

Quality Well Service, Inc.

Invoice

**PO Box 468
Pratt, KS 67124**

Date	Invoice #
4/18/2017	1864

Bill To
Trek AEC, LLC 4925 Greenville Ave, Ste.915 Dallas, TX 75206

P.O. No.	Terms	Lease Name
		Hoffman #1-17

Description	Qty	Rate	Amount
Rig Time	17	180.00	3,060.00T
Floor Rental	1	250.00	250.00T
Rip Casing	2	400.00	800.00T
Water Truck	5	85.00	425.00T
Phone Calls	1	20.00	20.00T
Clerical	1	25.00	25.00T
Wiping Rubber	1	20.00	20.00T
Fresh Water	2	30.00	60.00T
Hoffman #1-17 Ellsworth Co. 4/13/17: Drove to location, raised pole, pulled rods and tubing, drove home. 4/14/17: Drove to location, dug cellar and pit, unapcked casing head, set floor, pulled slips, pumped 25 sacks, 100# hulls, displaced to 1565', shut in at 1000 psi, ripped casing at 1025', 950', and 855', came free at 855', pumped 35 sacks cement, 3% cc, 50# hulls, waited 2 hours, tagged cement at 250', pumped 150 sacks cement, circulated to surface, pulled rest of casing, tore down floor and rig, emptied pit, back filled cellar and pit.			
Thank You for your business!		Subtotal	\$4,660.00
		Sales Tax (7.5%)	\$349.50
		Total	\$5,009.50

Quality Well Service, Inc.

**PO Box 468
Pratt, KS 67124**

Invoice

Date	Invoice #
4/18/2017	C-1560

Bill To
Trek AEC, LLC 4925 Greenville Ave, Ste.915 Dallas, TX 75206

P.O. No.	Terms	Lease Name
		Hoffman #1-17

Description	Qty	Rate	Amount
Common	130	15.50	2,015.00T
Poz	80	9.50	760.00T
Gel	7	22.00	154.00T
Calcium	1	60.00	60.00T
Plug	1	950.00	950.00T
Handling	221	2.10	464.10T
.08 * sacks * miles	9,945	0.08	795.60T
Service Supervisor	1	150.00	150.00T
LMV	45	3.75	168.75T
Heavy Equipment Mileage	90	8.00	720.00T
Customer Discount		-2,494.98	-2,494.98
Discount Expires after 30 days from the date of the invoice		0.00	0.00
Hoffman #1-17 Ellsworth Co.			
Thank You for your business!		Subtotal	\$3,742.47
		Sales Tax (7.5%)	\$280.69
		Total	\$4,023.16

QUALITY WELL SERVICE, INC.

Federal Tax I.D. # 481187368

6652

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	4-14-17	Sec.	17	Twp.	16	Range	7	County	Ellsworth	State	KS	On Location		Finish		
Lease	Hoffman	Well No.	1-17.			Location										
Contractor	Quality Well Service							Owner								
Type Job	PTA.							To Quality Well Service, Inc. You are hereby requested to rent cementing equipment and furnish cementer and helper to assist owner or contractor to do work as listed.								
Hole Size	T.D.							Charge To								
Csg.	4.5							Trek								
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 210sr 60/40 4% Gel.								
EQUIPMENT																
Pumptrk	8	No.					Common 130									
Bulktrk	10	No.					Poz. Mix 80									
Bulktrk		No.					Gel. 7									
Pickup		No.					Calcium 1									
JOB SERVICES & REMARKS																
Rat Hole								Hulls 150#								
Mouse Hole								Salt								
Centralizers								Flowseal								
Baskets								Kol-Seal								
D/V or Port Collar								Mud CLR 48								
1st. Hooked up to 4.5 csg pipe							CFL-117 or CD110 CAF 38									
25sr 60/40 4% Gel 100# hulls.							Sand									
displaced with 24.8 bbls H ₂ O							Handling 221									
to 1565' shut in 1000 psi.							Mileage 45									
FLOAT EQUIPMENT																
2nd. Pumped 35sr 60/40 4% Gel 3%							Guide Shoe									
cc 50# hulls @ 850' tagged cement @ 520'							Centralizer									
3rd Pumped 150sr 60/40 4% Gel @ 520' to surface.							Baskets									
							AFU Inserts									
							Float Shoe									
							Latch Down									
							LMV 45									
							Service supervisor									
							Pumptrk Charge PTA.									
							Mileage 90									
												Tax				
												Discount				
												Total Charge				
X Signature																