

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

KANSAS CORPORATION COMMISSION 1359300
 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

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

Form CP-4
July 2014

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 #: 4706
Name: Messenger Petroleum, Inc.
Address 1: 525 S Main ST.
Address 2: _____
City: Kingman State: Ks Zip: 67068 + 1968
Contact Person: Jon F. Messenger
Phone: (620) 532-5400
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 - 15-095-21499-00-00
Spot Description: NA
SE SE SW Sec. 15 Twp. 30 S. R. 7 East West
330 Feet from North / South Line of Section
2,970 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Kingman
Lease Name: Pulliam-(Tenneco) Well #: 1-15
Date Well Completed: NA
The plugging proposal was approved on: NA (Date)
by: Jeff Klock (KCC District Agent's Name)
Plugging Commenced: 6/20/2017
Plugging Completed: 6/22/2017

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
		Surface	8 5/8"	259'	175 Sacks Cement
		Production	5 1/2"	4273'	125 Sacks Cement

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.

Drove to location, raised pole, hooked up to 5 1/2" casing, pumped 30 sacks cement, 100# hulls, displaced to 3800' with 97 bbls of water, shut in at 1000 psi, dug cellar, set floor, pulled slips, cut surface off 4' below ground, while pulling stretch, 5 1/2" slip collar pulled off casing, welded on slip collar, ripped casing at 3070', came free, pulled casing up to 1200', pumped 12 sacks gel, 50 sacks cement, pulled casing up to 750', waited 2 hours, tagged cement at 975', pumped 35 sacks at 750', pulled casing to 300', circulated with 100 sacks cement, pulled rest of casing, tore down floor and rig.

Plugging Contractor License #: 31925 Name: Quality Well Service, Inc.
Address 1: 190 US HWY 56 Address 2: _____
City: Ellinwood State: Ks Zip: 67526 + _____
Phone: (620) 727-3409
Name of Party Responsible for Plugging Fees: Jon F. Messenger
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.

Signature: _____

QUALITY WELL SERVICE, INC.

Federal Tax I.D. # 481187368

6675

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	Sec.	Twp.	Range	County	State	On Location	Finish
6-22-17	15	30	7	Kingman	K		
Lease Pullman	Well No. 1-15		Location				
Contractor Quality Well Service				Owner			
Type Job Pumpal Pullman 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. 5-8		Depth		To 11055 gal. PTA			
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 215 ss Common			
EQUIPMENT							
Pumptrk 8	No.			12 gal ca side Common 215			
Bulktrk 9	No.			Poz. Mix			
Bulktrk	No.			Gel. 12			
Pickup	No.			Calcium 2			
JOB SERVICES & REMARKS							
Rat Hole				Salt			
Mouse Hole				Flowseal			
Centralizers				Kol-Seal			
Baskets				Mud CLR 48			
D/V or Port Collar				CFL-117 or CD110 CAF 38			
Worked on to 5' from pumpal				Sand			
300 Common 100# Halls displaced				Handling 231			
with 97 lbs H ₂ O to 3000 gal				Mileage 50			
in 100 psi.				FLOAT EQUIPMENT			
				Guide Shoe			
1 st Pumpal 12 Ad 5' in Common 30				Centralizer			
11 2' 1200' tagged cement @ 975				Baskets			
				AFU Inserts			
				Float Shoe			
2nd Pumpal 3500 Common cement @ 750				Latch Down			
				LMV 50			
				Scribe separator			
3rd Pumpal 11000 Common cement @ 300 to 500 gal				Pumptrk Charge PTA			
				Mileage 100			
						Tax	
						Discount	
X Signature						Total Charge	