

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

KANSAS CORPORATION COMMISSION      1360490  
 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.

PO Box 468  
Pratt, KS 67124

# Invoice

|           |           |
|-----------|-----------|
| Date      | Invoice # |
| 7/13/2017 | C-1595    |

|  |
|--|
| Bill To  |
| F.G. Holl Company LLC<br>PO Box 308<br>Ellinwood, KS 67526<br>Attn: Rob Long |

|          |       |                 |
|----------|-------|-----------------|
| P.O. No. | Terms | Lease Name      |
|          |       | Skalsky A #1-22 |

| Description   | Qty    | Rate      | Amount |
|---|--------|-----------|--------|
| Common  | 290    | 15.50     |        |
| Poz   | 190    | 9.50      |        |
| Gel   | 27     | 22.00     |        |
| Hulls   | 1      | 45.00     |        |
| Plug  | 1      | 950.00    |        |
| Handling  | 509    | 2.10      |        |
| .08 * sacks * miles   | 17,000 | 0.08      |        |
| Service Supervisor  | 1      | 150.00    |        |
| LMV   | 35     | 3.75      |        |
| Heavy Equipment Mileage                                     | 70     | 8.00      |        |
| Customer Discount   |        | -4,463.66 |        |
| Discount Expires after 30 days from the date of the invoice |        | 0.00      |        |
| Skalsky A #1-22<br>Edwards Co.                              |        |           |        |

Thank You for your business!

|                         |
|-------------------------|
| <b>Subtotal</b>         |
| <b>Sales Tax (7.5%)</b> |
| <b>Total</b>            |

# QUALITY WELL SERVICE, INC.

Federal Tax I.D. # 481187368

6684

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                | 7-   | Sec. | 22                      | Twp. | 24                      | Range  | 16     | County   | Edwards            | State | KS | On Location |   | Finish   |  |                          |  |
| Lease               | SKalsky A                                  |      | Well No.                |      |                         | 1-22   |        | Location |                    |       |    |             |   |          |  |                          |  |
| Contractor          | Quality Well Service                       |      |                         |      |                         |  |        |          |                    |       |    | Owner       | To Quality Well Service, Inc.<br>You are hereby requested to rent cementing equipment and furnish cementer and helper to assist owner or contractor to do work as listed. |          |  |                          |  |
| Type Job            | PTA  |      | T.D.                    |      |                         | Charge To  |        |          |                    |       |    |             |   |          |  | F.G. Hall                |  |
| Hole Size           |  |      | Depth                   |      |                         | Street   |        |          |                    |       |    |             |   |          |  |                          |  |
| Csg.                | 4.5  |      | Depth                   |      |                         | City   |        |          |                    |       |    |             |   |          |  | State                    |  |
| Tbg. Size           | 2 3/8                                      |      | Shoe Joint              |      |                         | The above was done to satisfaction and supervision of owner agent or contractor. |        |          |                    |       |    |             |   |          |  |                          |  |
| Tool                |  |      | Displace                |      |                         | Cement Amount Ordered  |        |          |                    |       |    |             |   |          |  | 4800sk 60/40 4 3/4 6 1/2 |  |
| Cement Left in Csg. | EQUIPMENT                                  |      |                         |      |                         |  |        |          |                    |       |    |             |   |          |  |                          |  |
| Meas Line           | No.  |      | No.                     |      | No.                     |  | No.    |          | 10 5/8 6el on side |       |    |             |   |          |  |                          |  |
|                     | Pumptrk                                    |      | Bulktrk                 |      | Bulktrk                 |  | Pickup |          | Common             |       |    |             |   |          |  | 290                      |  |
|                     |  |      |                         |      |                         |  |        |          | Poz. Mix           |       |    |             |   |          |  | 190                      |  |
|                     |  |      |                         |      |                         |  |        |          | Gel.               |       |    |             |   |          |  | 27                       |  |
|                     |  |      |                         |      |                         |  |        |          | Calcium            |       |    |             |   |          |  |                          |  |
|                     | JOB SERVICES & REMARKS                     |      |                         |      |                         |  |        |          |                    |       |    |             |   |          |  |                          |  |
|                     | Rat Hole                                   |      | Salt                    |      | Hulls                   |  | 100#   |          |                    |       |    |             |   |          |  |                          |  |
|                     | Mouse Hole                                 |      | Flowseal                |      | Hulls                   |  |        |          |                    |       |    |             |   |          |  |                          |  |
|                     | Centralizers                               |      | Koi-Seal                |      | Salt                    |  |        |          |                    |       |    |             |   |          |  |                          |  |
|                     | Baskets                                    |      | Mud CLR 48              |      | Flowseal                |  |        |          |                    |       |    |             |   |          |  |                          |  |
|                     | D/V or Port Collar                         |      | CFL-117 or CD110 CAF 38 |      | Koi-Seal                |  |        |          |                    |       |    |             |   |          |  |                          |  |
|                     | 1st Pumped                                 |      | Sand                    |      | Mud CLR 48              |  |        |          |                    |       |    |             |   |          |  |                          |  |
|                     | 4 1/2 gel @ 1130'                          |      | Handling                |      | CFL-117 or CD110 CAF 38 |  |        |          |                    |       |    |             |   |          |  |                          |  |
|                     |  |      | 509                     |      | Sand                    |  |        |          |                    |       |    |             |   |          |  |                          |  |
|                     |  |      | Mileage                 |      | Handling                |  |        |          |                    |       |    |             |   |          |  |                          |  |
|                     | 2nd Pumped                                 |      | Mileage                 |      | Mileage                 |  |        |          |                    |       |    |             |   |          |  |                          |  |
|                     | @ 4 1/2 circulated out 4.5 csg.            |      | FLOAT EQUIPMENT         |      |                         |  |        |          |                    |       |    |             |   |          |  |                          |  |
|                     |  |      | Guide Shoe              |      |                         |  |        |          |                    |       |    |             |   |          |  |                          |  |
|                     |  |      | Centralizer             |      |                         |  |        |          |                    |       |    |             |   |          |  |                          |  |
|                     | 3rd. Surrogate in 4.5 csg. pumped          |      | Baskets                 |      |                         |  |        |          |                    |       |    |             |   |          |  |                          |  |
|                     | 170 sk water 4 1/2 gel lost                |      | AFU Inserts             |      |                         |  |        |          |                    |       |    |             |   |          |  |                          |  |
|                     | recirculated pumped another 6.5 sk.        |      | Float Shoe              |      |                         |  |        |          |                    |       |    |             |   |          |  |                          |  |
|                     | 60/40 4 1/2 gel shut down.                 |      | Latch Down              |      |                         |  |        |          |                    |       |    |             |   |          |  |                          |  |
|                     | 7-5-17.                                    |      | LMV                     |      | 35                      |  |        |          |                    |       |    |             |   |          |  |                          |  |
|                     | 1st Pumped                                 |      | Pumptrk Charge          |      | PTA                     |  |        |          |                    |       |    |             |   |          |  |                          |  |
|                     | down 4.5 csg - Ran 1' to 320'              |      | Mileage                 |      | 7.0                     |  |        |          |                    |       |    |             |   |          |  |                          |  |
|                     | pumped 80 sk 60/40 - 4 1/2 gel to surface. |      |                         |      |                         |  |        |          |                    |       |    |             |   |          |  |                          |  |
| Signature           |  |      |                         |      |                         |  |        |          |                    |       |    | Tax         |   | Discount |  | Total Charge             |  |