

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

KANSAS CORPORATION COMMISSION 1364836
 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 OILWELL CEMENTING, INC.

Federal Tax I.D.# 20-2886107

Phone 785-483-2025

Home Office P.O. Box 32 Russell, KS 67665

No. 157

Cell 785-324-1041

Date	5-8-17	Sec.	32	Twp.	8	Range	17	County	Rooks	State	Ks	On Location		Finish	2:45 PM		
Lease								Well No.		Location							
Stampers E								5		Plainville - SN to R Rd, 4E to 21 Rd							
Contractor								Western Well Service		Owner 1/2 S W 1/4							
Type Job								Plug		To Quality Oilwell Cementing, 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 Woodway oil + gas							
Csg.								5 1/2"		Depth							
Tbg. Size								27/8"		3100'		Street					
Tool								Depth		City							
Cement Left in Csg.								Shoe Joint		State							
Meas Line								Displace H2O		The above was done to satisfaction and supervision of owner agent or contractor.							
EQUIPMENT								Common		Cement Amount Ordered 700 60/40 4% 800# Hulls							
Pumptrk 18 No.								Cementer Rick		Hulls							
Bulktrk 9 No.								Helper		Salt							
Bulktrk 19 No.								Driver Tony		Flowseal							
Bulktrk 19 No.								Driver Doug		Kol-Seal							
JOB SERVICES & REMARKS								Hulls		Mud CLR 48							
Remarks: 3100' - 200 SX 200# Hulls								Salt		CFL-117 or CD110 CAF 38							
Rat Hole 1300' - 315 SX								Flowseal		Sand							
Mouse Hole Closed back side + Circulate								Kol-Seal		Handling							
Centralizers Cement in Surface Casing								Mud CLR 48		Mileage							
Baskets w/ 25 SX pulled tubing out								CFL-117 or CD110 CAF 38		FLOAT EQUIPMENT							
D/V or Port Collar of the hole put on 1 5/8"								Sand		Guide Shoe							
Scrap + mix 50 SX shut in								Handling		Centralizer							
20 300 #								Mileage		Baskets							
Cement did Circulate								Guide Shoe		AFU Inserts							
								Centralizer		Float Shoe							
								Baskets		Latch Down							
								AFU Inserts		Pumptrk Charge							
								Float Shoe		Mileage							
								Latch Down		Tax							
								Pumptrk Charge		Discount							
								Mileage		Total Charge							
X Signature Kory Pfeiffer																	