

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

KANSAS CORPORATION COMMISSION 1367724
 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

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**KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION
WELL PLUGGING RECORD
K.A.R. 82-3-117**

Form CP-4
July 2014
**Type or Print on this Form
Form must be Signed
All blanks must be Filled**

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 - 15-095-21760-00-00
 Spot Description: NA
 - - - SE NE Sec. 15 Twp. 30 S. R. 7 East West
3,300 Feet from North / South Line of Section
660 Feet from East / West Line of Section
 Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
 County: Kingman
 Lease Name: Dunkelberger Well #: B#3
 Date Well Completed: NA
 The plugging proposal was approved on: NA (Date)
 by: Jeff Klock (KCC District Agent's Name)
 Plugging Commenced: 7/30/2017
 Plugging Completed: 8/03/2017

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"	275'	170 Sacks Cement
		Production	4 1/2"	4149'	175 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, checked hole, set bridge plug at 4020', bailed 2 sacks cement on plug, set bridge plug at 3675', bailed 2 sacks cement on plug, loaded hole with water, dug cellar and pit, unpacked casing head, set floor, shot casing at 2600', didn't come free, worked casing, shot casing at 2010', pipe still not free, worked casing, put pit liner in, shot casing at 1500', didn't come free, shot casing at 1230', didn't come free, shot casing at 1170', came free, got ready to pull casing, casing hung up again, pumped 35 sacks cement, 3% cc, waited 1 1/2 hours, tagged cement at 950', shot casing at 730', came free, pumped 35 sacks cement, pulled casing to 325', pumped 140 sacks cement to surface, pulled rest of casing, tore down floor and rig, emptied pit.

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: Messenger Petroleum, Inc.
 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

6695

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	8-3-17	Sec.	15	Twp.	30	Range	7	County	Kingman	State	KS	On Location		Finish													
Lease	Dunkelberger		Well No.		B-3		Location																				
Contractor	Quality Well Service							Owner																			
Type Job	PTH							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.																			
Csg.	4.5							Depth																			
Tbg. Size								Depth																			
Tool								Depth																			
Cement Left in Csg.								Shoe Joint																			
Meas Line								Displace																			
										Charge To						Messenger											
										Street						City						State					
										The above was done to satisfaction and supervision of owner agent or contractor.																	
										Cement Amount Ordered						210 sq (approx)											
EQUIPMENT																											
Pumptrk	8	No.														Common	210										
Bulktrk	9	No.														Poz. Mix											
Bulktrk		No.														Gel.											
Pickup		No.														Calcium	1										
JOB SERVICES & REMARKS																											
Rat Hole																Hulls											
Mouse Hole																Salt											
Centralizers																Flowseal											
Baskets																Kol-Seal											
D/V or Port Collar																Mud CLR 48											
1 st Pumped 250 sq (approx) cement @ 1170'																CFL-117 or CD110 CAF 38											
2 nd Pumped 250 sq (approx) cement @ 720'																Sand											
																Handling	211										
																Mileage	50										
FLOAT EQUIPMENT																											
3 rd Pumped 140 sq (approx) cement @ 325' to surface																Guide Shoe											
																Centralizer											
																Baskets											
																AFU Inserts											
																Float Shoe											
																Latch Down											
																LMV	50										
																Service Supervisor											
																Pumptrk Charge	PTA										
																Mileage	100										
												Tax															
												Discount															
												Total Charge															
<input checked="" type="checkbox"/> Signature																											

