**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

## 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

Type of Well: (Check one) Oil Well Gas Well Water Supply Well Other:  ENHR Permit #: Gas St  Is ACO-1 filed? Yes No If not, is we  Producing Formation(s): List All (If needed attach another  Depth to Top: Botte	Zip: 67068 + 1966  Cathodi  SWD Permit #:  orage Permit #:  orage Permit #:  Il log attached? Yes   or sheet)  orm:	Spot D N	API No. 15				
Departo top. Bott							
Show depth and thickness of all water, oil and gas form	ations.						
Oil, Gas or Water Records		Casing Record (S	urface, Conductor & Produ	roduction)			
Formation Content	Casing	Size	Setting Depth	Pulled Out			
	Surface	8 5/8"	273'	175 Sacks Cement			
	Production	4 1/2"	4198'	125 Sacks Cement			
Describe in detail the manner in which the well is plugged cement or other plugs were used, state the character of the cellar and pit, couldn't get casing heat surface off 4' below ground, ripped casing tagged plug, pumped 35 sacks cemed casing out tore down floor and rig.	f same depth placed from (botte dge plug at 4020', bated ring off, so cut it, us asing at 2600', came to 1200', pumped 35 ent at 750', pulled ca	tom), to (top) for e ailed 2 sacks unpacked ca free, pulled sacks ceme sing to 325'	ach plug set.  s cement, loaded sing head, set flo casing to 1300', ent, pulled casing circulated with 1	hole with water, dug por, pulled slips, cut put in pit liner, pumped to 750', waited 2 hours, 150 sacks cement, pulled			
Plugging Contractor License #: 31925		<sub>Name:</sub> Qual	ity Well Service, I	Inc.			
Address 1: 190 US Hwy 56		Address 2:					
City: Ellinwood		State: _	Ks	zip: <u>67526</u> +			
Phone: (620 ) 727-3409							
Name of Party Responsible for Plugging Fees: Mes	senger Petroleum, Ind	с.					
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 knowled the same are true and correct, so help me God.	dge of the facts statements, an	nd matters herein	contained, and the log of	the above-described well is as filed, and			
Signature:							

## QUALITY WELL SERVICE, INC. Federal Tax I.D. # 481187368

6691

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

	Sec.	Twp.	Range	# G	County	State	On Location	Finish				
Date 7-20-17	15	30	7	K	igmon Ks							
Lease Lankalheer of Well No. 6-4 Locati												
Contractor Quality Well Service				Owner								
Type Job PTA	1				To Quality Well Service, Inc.							
Hole Size T.D.			You are hereby requested to rent cementing equipment and furnish cementer and helper to assist owner or contractor to do work as listed.									
Csg. 4.5		Depth	Depth			Charge To						
Tbg. Size		Depth			Street							
Tool Depth			City State									
Cement Left in Csg.	Cement Left in Csg. Shoe Joint			The above was done to satisfaction and supervision of owner agent or contractor.								
Meas Line		Displace	е		Cement Amo	ount Ordered	a sy Com	ROWA				
	EQUIP	MENT			20	ex fel or	Lide !					
Pumptrk No.					Common	220						
Bulktrk No.					Poz. Mix							
Bulktrk No.					Gel. 20							
Pickup No.			Calcium A									
JOB SE	RVICES	& REMA	RKS		Hulls .							
Rat Hole				14.8	Salt							
Mouse Hole					Flowseal							
Centralizers			Kol-Seal									
Baskets				Mud CLR 48								
D/V or Port Collar				CFL-117 or CD110 CAF 38								
1st Punned 2004 Gol To 1300				Sand								
Polled the by 1200 ovarses					Handling 2 4 2							
25 St (000)	UA 3	400	1 (	1	Mileage 50							
				FLOAT EQUIPMENT								
2nd Pennal 3552 (cmarca 34				Guide Shoe								
CC 0 750			Centralizer									
					Baskets							
300 Punked 150s 6 mores 32					AFU Inserts							
				Float Shoe								
					Latch Down							
				LMV 50								
					Sarvir	e service						
				Pumptrk Charge								
		u fi T			Mileage //	0		1				
							Tax					
							Discount					
( Signature							Total Charge					

## **Quality Wireline Services, LLC**

Service Order No. 0104

324 Simpson • Pratt, Kansas 67124 • 620-388-2309 or 620-727-6964 • Fax 620-672-3663

Company							Date/	29 - Za tan ili	
	71,55engt	Potok	· -				Client Order #	9 . T - 2 TT.	
Billing Address		E TRAINE E	City			State	Zip	)	
Lease & Well #	A LIBERT		F	ield Name				on (coordinates)	
County	2) with be	State							
K. Cymn 7 - K. 1505				asing Size			Casing Weight		
Fluid Level (surface)  Reading From  Operator		Reading From	Customer T.D.				ne T.D.		
		Operator	0	perator			Unit#		
Product Code		Description		Qty Unit Price			Depth \$ Amount		
	7.14			diy	Omit Frie	From	То	\$ Amount	
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						DISCOUN	T 115	5.00	
						SUBTOTA	1/15	0 00	
tomer						TA	X / 2	7 (0 -	
Printing, Inc 620-672-3	3656						412	3.00	
						NET TOTA	17	12.10	