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

1371948

Form CP-4
March 2009
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 #: _____ API No. 15 - _____ Spot Description: _-__- Sec. ___ Twp. ___ S. R. ___ East West Address 1: ____ ___ Feet from North / South Line of Section Address 2: ___ Feet from East / West Line of Section Contact Person: _____ Footages Calculated from Nearest Outside Section Corner: Phone: (_____) _____ NE NW SE SW Type of Well: (Check one) Oil Well Gas Well OG D&A Cathodic County: _____ Water Supply Well Other: _____ SWD Permit #:___ Lease Name: ______ Well #: _____ ENHR Permit #: _____ Gas Storage Permit #: ____ Date Well Completed: ____ Is ACO-1 filed? Yes No If not, is well log attached? Yes No The plugging proposal was approved on: ______(Date) Producing Formation(s): List All (If needed attach another sheet) by: _____ (KCC **District** Agent's Name) ______ Depth to Top: _____ Bottom: _____ T.D. ____ Plugging Commenced:_____ Bottom: T.D. _ Depth to Top: ___ Plugging Completed: ______ Depth to Top: ______ Bottom: _____ T.D. _____ Show depth and thickness of all water, oil and gas formations. Oil, Gas or Water Records Casing Record (Surface, Conductor & Production) Size Pulled Out Formation Content Casing Setting Depth

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 Fee	3:								
State of	County,		, ss.						
				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.

QUALITY OILWELL CEMENTING, INC. Federal Tax I.D.# 20-2886107 Home Office P.O. Box 32 Bussell KS 67665

Phone 705 402 2005		Federal Tax I.D.# 20-2886107 Home Office P.O. Box 32 Russell, KS 67665 No							328	
Phone 785-483-2025 Cell 785-324-1041	Но	me Office	P.O. Bo	X 32 H	ussell, KS	67665	a Tempor en N	or turnished u.o.	b	
Sec.	Twp.	Range	С	ounty	Stat	e,	On Location	Finish	di -	
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Contractor Confessional			1 (14)	To Quality	Oilwell Cemer	nting, Inc.	ementing equipr	nent and furnish		
Type Job P. T. A				cementer a	and helper to	assist own	er or contractor t	o do work as liste	d.	
Hole Size	T.D.			Charge To	Grady	Boldin	g Corx	,	2	
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Tbg. Size 27/8	Depth	programme and the second		City			State	<u> </u>	3	
Tool	Depth		, .	The above w	vas done to sat	isfaction and	supervision of ov	ner agent or contra	cto	
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Pumptrk No. Cementer Helper	Paig .	· · · · · · · · · · · · · · · · · · ·		Poz. Mix	108					
Bulktrk Driver	'++			Gel. 22					10	
Bulktrk 19 No. Driver Driver	ug			Calcium	-				1 /	
JOB SERVICES	S & REMARK	(S · ,		Hulls 60	20#/	12)				
Remarks: KCC Tat ST	acb			Salt	(
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Mouse Hole		6	11 11	Kol-Seal		-		1 . 1 1	7-1	
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(135) 2709	K4 /2ge	12600	That's	J-U Inserts		<u> </u>	2412			
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Signature Colored		P 11 - 11 - 1	April 1	A1 11	agent by		Total Charg	ge .		