

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
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
Cell 785-324-1041

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

No. 815

Date	5-3-18	Sec.	28	Twp.	11	Range	22	County	Trego	State	KS	On Location		Finish	1:00pm
Lease								Well No.		Owner					
Contractor								Professional		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.					
Type Job								P.T.A		Charge To					
Hole Size								4 1/2		T.D.					
Csg.								2 3/8		Depth					
Tbg. Size								2 3/8		Depth					
Tool										Depth					
Cement Left in Csg.										Shoe Joint					
Meas Line								Displace		Cement Amount Ordered					
EQUIPMENT								Common		183					
Pumptrk								20		Cementer					
Bulktrk								19		Driver					
JOB SERVICES & REMARKS								Hulls		300# (6)					
Remarks:								KCC Marvin Mills		Salt					
Rat Hole										Flowseal					
Mouse Hole										Kol-Seal					
Centralizers										Mud CLR 48					
Baskets										CFL-117 or CD110 CAF 38					
D/V or Port Collar								1st		Sand					
								2nd		Handling					
								3rd		Mileage					
										FLOAT EQUIPMENT					
										Guide Shoe					
										Centralizer					
										Baskets					
										AFU Inserts					
										Float Shoe					
										Latch Down					
										Pumptrk Charge					
										Mileage					
Signature										Tax					
										Discount					
										Total Charge					

USED 3055K 300# HULLS

[Handwritten Signature]

Pumptrk Charge *plug*
Mileage *34*

TO:API:Well Number: 15-195-20129-0002

STATE CORPORATION COMMISSION

CONSERVATION DIVISION - PLUGGING

130 SOUTH MARKET, SUITE 2078

WICHITA, KANSAS 67202

Spot: SW SE NW Sec/Twnshp/Rge: 28-11-22W

2887 feet from S Section Line

3657 feet from E Section Line

Lease/Unit Name: KLINE Well Number: 1

County: TREGO Total Vertical Depth: 4050 feet

String Size Depth (ft) Pulled (ft)

Operator License No.: 9090

Operator Name: CHARTER ENERGY INC

Address: PO BOX 252
GREAT BEND KS 67530

Conductor

Surface 8 5/8 208' 200 SXS

Production 4 1/2 4045' 200 SXS

Liner

Well Type: UIC UIC Docket No: E 23813-0011 Date/Time to Plug: 5-3-18 10 AM

Plug Co. License No.: Plug Co. Name: PROFESSIONAL PULLING

Proposal Rcvd. from: Company: Phone:

Proposed

Plugging

Method

**425 SXS 60/40 POZ 4 % GEL 700 # HULLS
PERFS @ 3556'-57', 3617'-74', 3896'-3912'
SHOOT PERFS @ 2200' 1750' 625'**

Plugging Proposal Received By: MARV MILLS Witness Type: All Partial Not Witnessed

Date/Time Plugging Completed: 5-3-18 1:30 PM KCC Agent: MARVIN MILLS

Actual Plugging Report:

**RT TO 3528' PUMP 50 SXS CEMENT 200# HULLS
PT TO 3228' PUMP 75 SXS CEMENT 100 # HULLS
PT TO 2228' PUMP 150 SXS CEMENT GOOD CIRCULATION OF CEMENT
PT TOP OFF CASING WITH 15 SXS CEMENT FULL
TIE ON BACK SIDE SQUEEZE WITH 15 SXS SHUT IN 200 PSI**

Remarks: GPS: 39.06744 99.77257 QUALITY CEMENT TK # 815

Plugged through: TUBING CHRIS SCHOENHOFER ON JOB

District: 04 Marvin Mills E.C.R.S

Signed *Marvin Mills*
(TECHNICIAN)