KOLAR Document ID: 1435001

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 #			API No.	15 -			
Address 1:			I .	•	Twp S. R East West		
				Feet from			
City:	State:	Zip: +		Feet from	East / West Line of Section		
Contact Person:			Footage	s Calculated from Near	rest Outside Section Corner:		
Phone: ()				□ NE □ NW	SE SW		
Water Supply Well ENHR Permit #: Is ACO-1 filed? Yes Producing Formation(s):	Other: Ga No If not, i List All (If needed attach a	SWD Permit #: as Storage Permit #: swell log attached? Yes [nother sheet) Bottom: T.D.	Lease N Date We The plug	lame:ell Completed: gging proposal was app	oroved on: (Date) (KCC District Agent's Name)		
De	pth to Top:	Bottom: T.D	""				
De	pth to Top:	Bottom:T.D	——— Plugging	Plugging Completed:			
Show depth and thickness	ss of all water, oil and gas	formations.					
Oil, Gas or V	Water Records		Casing Record (Su	ing Record (Surface, Conductor & Production)			
Formation	Content	Casing	Size	Setting Depth	Pulled Out		
		plugged, indicating where the muter of same depth placed from (but it is a first from the muter of same depth placed from (but it is a first from the muter of same depth placed from the same depth placed from the muter of same depth placed from the same depth placed from t	·		ods used in introducing it into the hole. If		
Plugging Contractor Lice	ense #:		_ Name:				
Address 1: Addre				ess 2:			
City:			State:				
Phone: ()							
Name of Party Responsil	ble for Plugging Fees:						
State of	Cou	unty,	, SS.				
	(Print Na	ma)	E	mployee 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.



REMIT TO

QES Pressure Pumping LLC Dept:970 P.O.Box 4346 Houston, TX 77210-4346

MAIN OFFICE

P.O.Box884 Chanute, KS 66720 620/431-9210,1-800/467-8676 Fax 620/431-0012

Invoice

Invoice#

814740

Invoice Date: 12/18/18

Terms:

Net 30

Page

VAL ENERGY

125 N. Market, Ste. 1110 WICHITA KS 67202 **USA**

316-263-6688

QUENZER UNIT 1-3

==========	:======================================	=======================================		:========	=======
Part No	Description	Quantity	Unit Price	Discount(%)	Total
CE0451	Cement Pump Charge 1501' - 3000'	1.000	1,900.0000	25.000	1,425.00
CE0002	Equipment Mileage Charge - Heavy Equipment	40.000	7.1500	25.000	214.50
CE0710	Cement Delivery Charge	1.000	722.4000	25.000	541.80
CC5829	Lite-Weight Blend V (60:40:4)	240.000	16.0000	25.000	2,880.00
CC6075	Celloflake	60.000	3.0000	25.000	135.00
CP8228	8 5/8" Wooden Plug	1.000	165.0000	25.000	123.75
			Subtotal Discounted Amount SubTotal After Discount		7,093.40
					1,773.35
					5,320.05

Amount Due 7,459.59 If paid after 01/17/19 ______

Tax:

274.64

Total:

5,594.69



PRESSURE PUMPING LLC

TICKET NUMBER	55978
LOCATION_ <i>Octi</i>	4,45
FOREMAN 777/	PS Show

PO Box 884, Chanute, KS 66720

FIELD TICKET & TREATMENT REPORT

INVAIL #214740

620-431-92	10 or 800-467-8676	;		CEMEN	CEMENT		voicetion		
DATE	CUSTOMER#	WEL	L NAME & NUM		SECTION	TOWNSHIP	RANGE	COUNTY	
-/6-18	8576	Quenzo	runit/	-3	3	85	37 W	Shuma	
STOMER						1			
1 7 / 0/0 LING ADDRE	SY SS.				753 /	DRIVER	TRUCK#	DRIVER	
5N.M	aket.ste	.110				Coreylor			
			ZIP_CODE	-	70	NoilW			
ridhita	•	STATE	DI202	•					
		HOLE SIZE	1 9	J	L H_50 <i>90</i> 1	CASING SIZE & V	/EIGHT	1	
SING DEPTH		DRILL PIPE					OTHER	·····	
JRRY WEIGH	IT 13.8	SLURRY VOL			sk			****	
PLACEMENT	r	DISPLACEMEN	IT PSI	MIX PSI		RATE			
MARKS: S	alely med	Luc and	Rec we as	www Sid	Time L + # K	O Circulate	dell any	Plus acont	
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plus 100 plus 100	56 4	100'							
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ACCOUNT	O(IANITY)	or likere		CODINION		ODUCT	(1)(1)		
CODE	QUANITY	or UNITS	DE	SURPTION O	f SERVICES or PR	ODUC!	UNIT PRICE	TOTAL	
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-0002		40	MILEAGE	, ,			7,15	786.00	
04/0	0.3			095 + de/1			1.75	722.40	
C5829-	241	2 5x		ight blood			1600 3.00	3840,00	
C/075	7	40 ⁴	Cellola	alve / Plus	eal			180,00	
P82281		/	8 3 Cike	selva Me	(5		165,00	165.0	
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						:	SALES TAX	274.64	
3737	^ ./			· · · · · · · · · · · · · · · · · · ·			ESTIMATED	<u>(-1 : W///</u>	
	// O III						TOTAL	15 544.100	
	M - INN								

I acknowledge that the payment terms, unless specifically amended in writing on the front of the form or in the customer's account records, at our office, and conditions of service on the back of this form are in effect for services identified on this form