

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.

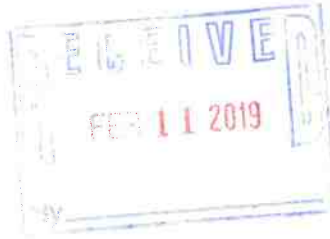
Plugging Contractor License #: _____ Name: _____
 Address 1: _____ Address 2: _____
 City: _____ State: _____ Zip: _____ + _____
 Phone: (_____) _____
 Name of Party Responsible for Plugging Fees: _____
 State of _____ County, _____, ss.
 _____ Employee of Operator or Operator on above-described well,
 (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 Well Service, Inc.

**PO Box 468
Pratt, KS 67124**



Invoice

Date	Invoice #
2/5/2019	C-1956

Bill To
Vess Oil Corporation 1700 Waterfront PKWY BLDG. 500 Wichita, KS 67206-6619

P.O. No.	Terms	Lease Name
		Kostner A #3

Description	Qty	Rate	Amount
Common	195	15.50	3,022.50T
Gel	10	22.00	220.00T
Calcium	3	60.00	180.00T
Hulls	1	45.00	45.00T
Plug/Pumped Bottom	1	950.00	950.00T
Handling	210	2.10	441.00T
.08 * sacks * miles	9,450	0.08	756.00T
Service Supervisor	1	150.00	150.00T
LMV	45	3.75	168.75T
Heavy Equipment Mileage	90	8.00	720.00T
Customer Discount		-2,328.63	-2,328.63
Discount Expires after 30 days from the date of the invoice		0.00	0.00
Kostner A #3 Kingman Co.			

Thank You for your business!	Subtotal	\$4,324.62
	Sales Tax (8.0%)	\$345.97
	Total	\$4,670.59

QUALITY WELL SERVICE, INC.

7057

Federal Tax I.D. # 481187368

Home Office 30060 N. Hwy 281, Pratt, KS 67124

Mailing Address P.O. Box 468

Office 620-727-3410

Fax 620-672-3663

Rich's Cell 620-727-3409

Brady's Cell 620-727-6964

Date	1-29-19 1-30-19	Sec.	4	Twp.	29	Range	6	County	Kingman	State	KS	On Location		Finish	
Lease	Kettler A			Well No.	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								Charge To							
Tool								Depth							
Cement Left in Csg.								Shoe Joint							
Meas Line								Displace							
EQUIPMENT										Cement Amount Ordered 19556 Common					
Pumptrk	8	No.						Common 195							
Bulktrk	10	No.						Poz. Mix							
Bulktrk		No.						Gel.							
Pickup		No.						Calcium							
JOB SERVICES & REMARKS										Hulls 100#					
Rat Hole								Salt							
Mouse Hole								Flowseal							
Centralizers								Kol-Seal							
Baskets								Mud CLR 48							
D/V or Port Collar	1-29-19							CFL-117 or CD110 CAF 38							
P Hooked up to 4.5 csg. Pumped										Sand					
2nd Pumped cement 100# hulls.										Handling 210					
Displace with 6/41 11 3/4 in.										Mileage 45					
3rd Pump in 1000 gal.										FLOAT EQUIPMENT					
1-30-19										Guide Shoe +					
P Pumped 500 common cement										Centralizer					
1000 gal @ 550 tagged @ 600'										Baskets					
										AFU Inserts					
2nd Pumped 1200 common cement										Float Shoe					
@ 330 to surface										Latch Down					
										LHW 45					
										500 common					
										Pumptrk Charge					
										Mileage 90					
										Tax					
										Discount					
										Total Charge					
X Signature															