KOLAR Document ID: 1454227

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				
Name:				Spot De	scription:				
Address 1:			.		Sec Tw	p S. R East West			
Address 2:					Feet from				
City: State: Zip: +					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 Water Supply Well Other: SWD Permit #:					County: Well #:				
ENHR Permit #:	Gas Sto	rage Permit #:		Date Well Completed:					
Is ACO-1 filed? Yes	No If not, is well	log attached? Yes		The plugging proposal was approved on:					
Producing Formation(s): List A	ll (If needed attach another	sheet)				(KCC District Agent's Name)			
Depth to	Top: Botto	m: T.D		Plugging Commenced:					
Depth to	Top: Botto	m: T.D		00 0					
Depth to	Top: Botto	m: T.D	'	. ragging	g completed.				
Show depth and thickness of a	all water, oil and gas forma	ations.							
Oil, Gas or Water	Records	Casing Record (Surface, Conductor & Production)			tion)				
Formation	Content	Casing	Size		Setting Depth	Pulled Out			
Describe in detail the manner cement or other plugs were us		_				Is used in introducing it into the hole. If			
Plugging Contractor License #:				e:					
Address 1:			Address 2:	:					
City:			;	State:		Zip:+			
Phone: ()									
Name of Party Responsible fo	r Plugging Fees:								
State of	County, _			, ss.					
	<i>3</i> , –			_	implayed of Onesates	Operator on obeyed decertibed			
(Print Name)				E	imployee 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 Well Service, Inc.

PO Box 468 Pratt, KS 67124

Bill To F.G. Holl Company LLC PO Box 308 Ellinwood, KS 67526 Attn: Rob Long

Invoice

Date	Invoice #			
3/11/2019	C-1977			

242212

	P.O. No.	Terms	L	ease Name	
]	Rudd #5-16	
Description		Qty	Rate	Amount	
Common Poz Gel Calcium Plug Handling .08 * sacks * miles Service Supervisor LMV Heavy Equipment Mileage Customer Discount Discount Expires after 30 days from the date of the invoice Rudd #5-16 Edwards Co. HD 7-1080 PLVG WELL Thank You for your business!		80 50 17 1 1 148 5,180 1 35 70			
		Subtotal			
		Sales Tax	(7.5%)		
		Total			

7074

QUALITY WELL SERVICE, INC. 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

	Sec.	Twp.	Range		County	State	On Location	Finish		
Date 3-5-19	16	24	16	Edi	26,000	KS				
Lease Ruad	V	/eli No.	5-16	Location	on					
Contractor Occ 14	tai	ell .	Service		Owner					
Type Job PTA				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					Charge F.G. Holl					
Tbg. Size		Depth			Street					
Tool		Depth			City State					
Cement Left in Csg.		Shoe Jo	oint		The above was	s done to satisfaction a	nd supervision of owner	agent or contractor.		
Meas Line		Displac	е		Cement Amo		1 54 60 140			
	EQUIPA	MENT			12 sx (set on state					
Pumptrk No.					Common 8	0				
Bulktrk No.					Poz. Mix 5	0				
Bulktrk No.					Gel. 17					
Pickup No.					Calcium					
JOB SE	RVICES	& REMA	RKS		Hulls					
Rat Hole					Salt					
Mouse Hole		3			Flowseal					
Centralizers					Kol-Seal					
Baskets	. 1				Mud CLR 48					
D/V or Port Collar					CFL-117 or CD110 CAF 38					
15th Pumpa) 1	254 6	501	50sv 60	140	Sand					
48 60 38 10 30 1030					Handling 148					
					Mileage 3	5				
2nd Pumped 50sy 60 140 4%					FLOAT EQUIPMENT					
Gel @ 300'					Guide Shoe					
		-			Centralizer					
Gel @ 40 to suitere					Baskets					
					AFU Inserts					
					Float Shoe					
					Latch Down					
					LMU 3	5				
					Service Suprovustar					
					Pumptrk Charge PTA					
					Mileage 70					
							Tax			
							Discount			
X Signature							Total Charge			