

**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 #
8/14/2019	C-2113

Bill To
VAL Energy Inc. 125 N. Market, Ste. 1710 Wichita, KS 67202

P.O. No.	Terms	Lease Name
		Stan Michael #3

Description	Qty	Rate	Amount
Common	75	15.50	1,162.50T
Poz	50	9.50	475.00T
Gel	430	0.22	94.60T
Calcium	100	1.20	120.00T
Plug	1	950.00	950.00T
Handling	130	2.10	273.00T
.08 * sacks * miles	3,750	0.08	300.00T
Service Supervisor	1	150.00	150.00T
LMV	20	3.75	75.00T
Heavy Equipment Mileage	40	8.00	320.00T
Customer Discount		-784.02	-784.02
Discount Expires after 30 days from the date of the invoice		0.00	0.00
Stan Michael #3 Barber Co.			

Thank You for your business!	<b>Subtotal</b>	\$3,136.08
	<b>Sales Tax (7.5%)</b>	\$235.21
	<b>Total</b>	\$3,371.29

# QUALITY WELL SERVICE, INC.

7197

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	Sec.	Twp.	Range	County	State	On Location	Finish
8-13-19	16	34S	11W	Barber	Ks		
Lease STAN Michel	Well No. 3-16	Location Men Lodge, Ks S to Scott Garow Rd					
Contractor CO-TOOLS	Owner E to Norstar Rd 1/4 S 1/4 E 1/4 Sinto			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.			
Type Job PTA	Hole Size 7 7/8		T.D.	Charge To Val ENERGY INC.			
Csg. 5 1/2	Depth CIBP d 4525'		Street				
Tbg. Size	Depth		City State				
Tool	Depth		City State				
Cement Left in Csg.	Shoe Joint		The above was done to satisfaction and supervision of owner agent or contractor.				
Meas Line	Displace		Cement Amount Ordered 125 sk 60/40 4 1/2 GEL				
<b>EQUIPMENT</b>				10sk FEL 2x CC ON SIDE			
Pumptrk 8 No.	TJ		Common 75 sk				
Bulktrk 7 No.	JAKE		Poz. Mix 30 sk				
Bulktrk No.			Gel. 430 #				
Pickup No.			Calcium 100 #				
<b>JOB SERVICES &amp; REMARKS</b>				Hulls			
Rat Hole				Salt			
Mouse Hole				Flowseal			
Centralizers				Kol-Seal			
Baskets FLOWER 3004'				Mud CLR 48			
D/V or Port Collar CIBP d 4525'				CFL-117 or CD110 CAF 38			
1st Plug 680' 10sk FEL 50sk 60/40 4 1/2 GEL				Sand			
Mix Pump 10sk FEL				Handling 130			
Mix Pump 50sk 60/40 4 1/2 GEL				Mileage 20			
DISP H2O				<b>FLOAT EQUIPMENT</b>			
2nd Plug 320' 40sk 60/40 4 1/2 GEL				Guide Shoe			
Mix Pump 40sk 60/40 4 1/2 GEL				Centralizer			
DISP H2O				Baskets			
3rd Plug 40'				AFU Inserts			
Mix Pump 35sk 60/40 4 1/2 GEL				Float Shoe			
Circ OUT TO P.T				Latch Down			
				service spn 1 EA			
				LMV 20			
Thank you				Pumptrk Charge PTA			
PLEASE CALL AGAIN				Mileage 40			
TODD TJ JAKE							
X Signature <i>Dean Howard</i>				Tax			
				Discount			
				Total Charge			