

**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.

7194

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
8-12-19	25	30	13	BARBER	KC		
Lease LEIKNEC	Well No. 1-29		Location ELMILLS RD; LARKSPUR 2 S WYNDU				
Contractor QWS				Owner			
Type Job PTA				To Quality Well Service, Inc. You are hereby requested to rent cementing equipment and furnish cement and helper to assist owner or contractor to do work as listed.			
Hole Size 7 7/8		T.D.		Charge To F.G. Hall Company LLC			
Csg. 5.5		Depth		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 180 SC 60/40 4% FEL			
<b>EQUIPMENT</b>				102 FEL 20/60 2% FEL			
Pumptrk 8	No.	75		Common 9946			
Bulktrk 7	No.	341		Poz. Mix 66			
Bulktrk	No.			Gel. 1563			
Pickup	No.			Calcium 100			
<b>JOB SERVICES &amp; REMARKS</b>				Hulls			
Rat Hole				Salt			
Mouse Hole				Flowseal			
Centralizers				Kol-Seal			
Baskets				Mud CLR 48			
D/V or Port Collar CIPRO 4730				CFL-117 or CD110 CAF 38			
PT Plug 1000 10% FEL 50% 60/40 4% FEL				Sand			
MIX Pump 10% FEL				Handling 131			
MIX Pump 50% 60/40 4% FEL				Mileage 20			
DISP 100				<b>FLOAT EQUIPMENT</b>			
2nd Plug 300 50% 60/40 4% FEL				Guide Shoe			
MIX Pump 50% 60/40 4% FEL				Centralizer			
DISP 120				Baskets			
3rd Plug 40				AFU Inserts			
MIX Pump 65% 60/40 4% FEL				Float Shoe			
TICK CMT TO RIT				Latch Down			
				SERVICE SUP 1 EA			
				LMV 20			
				Pumptrk Charge PTA			
				Mileage 40			
						Tax	
						Discount	
X Signature						Total Charge	

# Quality Wireline Services, LLC

Service Order No.  
**0633**

30060 N. Hwy 281 • P.O. Box 468 • Pratt, Kansas 67124 • 620-388-2309 or 620-727-6964 • Fax 620-672-3663

Date 8-8-15

Company <u>F G Hall Company</u>			Client Order # <u>04</u>		
Billing Address		City	State		Zip
Lease & Well # <u>LenKner 1-29</u>		Field Name		Legal Description (coordinates)	
County <u>Barber</u>	State <u>Kansas</u>	Casing Size		Casing Weight	
Fluid Level (surface)		Reading From	Customer T.D.		Quality Wire Line T.D.
Engineer <u>D. Ezell</u>	Operator <u>T. Coleman</u>		Operator		Unit# <u>01</u>

Product Code	Description	Qty	Unit Price	Depth		\$ Amount
				From	To	
	<u>5 1/2 CI BP</u>					<u>900<sup>00</sup></u>
	<u>Setting Charge @ 4730</u>			<u>0</u>	<u>4730</u>	<u>1,500<sup>00</sup></u>
	<u>2 Sks Cement Dump Baku @ 4730</u>			<u>0</u>	<u>4730</u>	<u>1,000<sup>00</sup></u>
	<u>Service Charge</u>					<u>1,500<sup>00</sup></u>

<b>SUBTOTAL</b>	<u>4,900<sup>00</sup></u>
<b>DISCOUNT</b>	<u>3,050<sup>00</sup></u>
<b>SUBTOTAL</b>	<u>1,850<sup>00</sup></u>
<b>TAX</b>	<u>138.75</u>
<b>NET TOTAL</b>	<u>1,988.75</u>

Customer \_\_\_\_\_  
Taylor Printing, Inc. • 620-672-3656

# Quality Well Service, Inc.

**PO Box 468  
Pratt, KS 67124**

# Invoice

Date	Invoice #
8/15/2019	C-2115

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

P.O. No.	Terms	Lease Name
		Lenkner #1-29

Description	Qty	Rate	Amount
Common	99	15.50	1,534.50T
Poz	66	9.50	627.00T
Gel	1,568	0.22	344.96T
Calcium	100	1.20	120.00T
Plug	1	950.00	950.00T
Handling	181	2.10	380.10T
.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		-1,200.39	-1,200.39
Discount Expires after 30 days from the date of the invoice		0.00	0.00
Lenkner #1-29 Barber Co.			

Thank You for your business!	<b>Subtotal</b>	\$3,601.17
	<b>Sales Tax (7.5%)</b>	\$270.09
	<b>Total</b>	\$3,871.26