

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



Service Order No.

2512

457 Yucca Lane • Pratt, Kansas 67124 • 620-388-5676

Date 6-26-19

Company <u>R&B Oil and Gas</u>			Client Order# <u>OW</u>		
Billing Address		City	State	Zip	
Lease & Well # <u>Dombaugh # 2-21</u>		Field Name		Legal Description (coordinates)	
County <u>Harper</u>	State <u>Kansas</u>	Casing Size <u>5.5</u>		Casing Weight	
Fluid Level (surface) <u>750</u>	Reading from <u>G.L.</u>	Customer T.D.		Excel Wireline T.D.	
Engineer <u>C. Barnard</u>	Operator <u>J. Coyle</u>	Operator		Unit# <u>01</u>	

Product Code	Description	Qty	Unit Price	Depth		\$ Amount
				From	To	
	<u>5.5 CIBP</u>					<u>800.00</u>
	<u>Setting Charge @ 4,346</u>		<u>.25</u>	<u>0</u>	<u>4,346</u>	<u>1,086.5</u>
	<u>Dump trailer / 2 sacks cement</u>		<u>.20</u>	<u>0</u>	<u>4,346</u>	<u>869.2</u>
	<u>Mast Trailer</u>					<u>500.00</u>
	<u>Service Charge</u>					<u>950.00</u>

Received the above service according to the terms and conditions specified below, which we have read and to which we hereby agree.

Customer _____

General Terms and Conditions

- (1) All accounts are to be paid within the terms fixed by Excel Wireline invoices and should these terms not be observed, interest at the rate of 1.5% per month will be charged from the date of such invoice. Interest, Attorney, Court, Filing and other fees will be added to accounts turned over to collections.
- (2) Because of the uncertain conditions existing in a well which are beyond the control of Excel Wireline, it is understood by the customer that Excel Wireline cannot guarantee the results of their services and will not be held responsible for personal or property damage in the performance of their services.
- (3) Should any of Excel Wireline instruments be lost or damaged in the performance of the operations requested, the customer agrees to make every reasonable effort to recover same, and to reimburse Excel Wireline for the value of the items which cannot be recovered or for the cost of repairing damage to items recovered.
- (4) It is further understood and agreed that all depth measurements shall be supervised by the customer or its employees, and customer hereby certifies that the zones, as shot, were approved.
- (5) The customer certifies that it has the full right and authority to order such work on such well, and that the well in which the work to be done by Excel Wireline is in proper and suitable condition for the performance of said work.
- (6) No employee is authorized to alter the terms or conditions of this agreement.

SUBTOTAL	<u>\$ 4,205.7</u>
DISCOUNT	<u>-1,055.70</u>
SUBTOTAL	<u>2,350.00</u>
TAX	<u>152.75</u>
NET TOTAL	<u>\$ 2,502.75</u>

Quality Wireline Services, LLC

Service Order No.
0595

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

Date 7-10-19

Company <u>R & B Oil & Gas</u>			Client Order # <u>OW</u>		
Billing Address		City	State	Zip	
Lease & Well # <u>Dom Baugh A # 2-21</u>		Field Name		Legal Description (coordinates)	
County <u>HARPER</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>02</u>	

Product Code	Description	Qty	Unit Price	Depth		\$ Amount
				From	To	
	<u>5/2 casing cut @ 1424</u>			<u>0</u>	<u>1424</u>	<u>2,100⁰⁰</u>
	<u>Service Charge</u>					<u>1,500⁰⁰</u>

SUBTOTAL	<u>3,600⁰⁰</u>
DISCOUNT	<u>1,650 00</u>
SUBTOTAL	<u>1,950⁰⁰</u>
TAX	<u>126.75</u>
NET TOTAL	<u>2,076.75</u>

Customer _____

Taylor Printing, Inc. • 620-672-3656

QUALITY WELL SERVICE, INC.

7162

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			
7-11-19	21	31S	3W	HARPEL	Ks					
Lease	Dombagh		Well No.	2-21				Location	MAG Plant 2 S 13A E Sinto	
Contractor	SHAWNEE WELL SERVICE INC			Owner				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		
Hole Size	7 7/8			T.D.						
Csg.				Depth				Charge To		
Tbg. Size	2 3/8			Depth				1350		
Tool				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		
EQUIPMENT				10 SK 6EL 4 SK CL				USED 190 SK		
Pumptrk	8 No.			Common				171		
Bulktrk	10 No.			Poz. Mix				19		
Bulktrk				Gel.				1000 lbs		
Pickup				Calcium				200 lbs		
JOB SERVICES & REMARKS				Hulls						
Rat Hole				Salt						
Mouse Hole				Flowseal						
Centralizers				Kol-Seal						
Baskets				Mud CLR 48						
D/V or Port Collar				CFL-117 or CD110 CAF 38						
1 st Plug 1350' 10 SK 6EL 35 SK 90/10 3 1/2 CL				Sand						
Mix: Pump 10 SK 6EL				Handling				204		
Mix: Pump 35 SK 90/10 3 1/2 CL				Mileage				50 / 5100		
Disp H ₂ O				FLOAT EQUIPMENT						
WOC Dixie TAG CMT				Guide Shoe						
1350'				Centralizer						
Mix: Pump 35 SK 90/10 3 1/2 CL				Baskets						
Disp H ₂ O WOC TAG 2 11/16'				AFU Inserts						
2 nd Plug 900' 35 SK				Float Shoe						
Mix: Pump 35 SK 90/10				Latch Down						
Disp H ₂ O				SERVICESUPV						
3 rd Plug 300'				LMV 50						
Mix: Pump 35 SK 90/10				Pumptrk Charge				PTA		
Circ cut to pit				Mileage				100		
THANK YOU TOODTJKEITH								Tax		
PLEASE CALL AGAIN								Discount		
Signature								Total Charge		