

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.

7219

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
9-6-19	12	2S	30W	DECATUR	KS		
Lease MINES		Well No. #1		Location OBERLIN KS ZW to 600 rd SW to SW Rd			
Contractor CO-TOOLS				Owner 3/4 W to Little Green W' Sinto			
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 7 7/8		T.D.		Charge To OIL PRODUCERS TAX OF KS			
Csg. 4 1/2		Depth 3773		Street			
Tbg. Size 2 3/8		Depth 3773		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 600 x 60/40 4 1/2 FEL			
EQUIPMENT				1700' hulls on site USED 2019 450' hulls			
Pumptrk 8	No.			Common 167			
Bulktrk 10	No.			Poz. Mix 112			
Bulktrk 11	No.			Gel. 960'			
Pickup	No.			Calcium			
JOB SERVICES & REMARKS				Hulls 4 1/2 ss			
Rat Hole				Salt			
Mouse Hole				Flowseal			
Centralizers				Kol-Seal			
Baskets				Mud CLR 48			
D/V or Port Collar				CFL-117 or CD110 CAF 38			
1st Plug 3773 82 ss 60/40 4 1/2 FEL				Sand			
Mix & Pump 82 ss 60/40 4 1/2 FEL 100' hulls				Handling 609 / 20000			
DISC HZ				Mileage 100			
2nd Plug 2539 82 ss 60/40 4 1/2 FEL				FLOAT EQUIPMENT			
Mix & Pump 82 ss 60/40 4 1/2 FEL 200' hulls				Guide Shoe			
DISC HZ				Centralizer			
3rd Plug 1252'				Baskets			
Mix & Pump 95 ss 60/40 4 1/2 FEL 150' hulls				AFU Inserts			
Circ Cont to P.T				Float Shoe			
PTDCH				Latch Down			
TOP OFF 4 1/2 CSG 10SS				SERVICE SMOV. 1 EA			
Hook up to BSB CSG 10SS				LMV 100			
				Pumptrk Charge PTA			
				Mileage 300			
Thank you PLEASE CALL AGAIN TERRY J. JACO JIMM J.				Tax			
				Discount			
				Total Charge			
X Signature 							