

**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 Wireline Services, LLC

Service Order No.  
0522

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

Date 4-19-19

Company <u>R&amp;B oil &amp; Gas Inc</u>			Client Order # <u>OW</u>		
Billing Address		City	State	Zip	
Lease & Well # <u>Adelhardt #1</u>		Field Name		Legal Description (coordinates)	
County <u>Kingman</u>	State <u>Kansas</u>	Casing Size		Casing Weight	
Fluid Level (surface)		Reading From		Customer T.D.	
Engineer <u>D. F. 701</u>		Operator		Unit # <u>01</u>	

Product Code	Description	Qty	Unit Price	Depth		\$ Amount
				From	To	
	<u>5 1/2 CSBP</u>					<u>900<sup>00</sup></u>
	<u>Setting Charge @ 4175</u>			<u>0</u>	<u>4175</u>	<u>1,500<sup>00</sup></u>
	<u>2 sks Cement Dump? Boils @ 4175</u>			<u>0</u>	<u>4175</u>	<u>1,000<sup>00</sup></u>
	<u>Service Charge</u>					<u>1,500<sup>00</sup></u>

SUBTOTAL	<u>4,900<sup>00</sup></u>
DISCOUNT	<u>3,050.00</u>
SUBTOTAL	<u>1,850<sup>00</sup></u>
TAX	<u>148.00</u>
NET TOTAL	<u>1,998.00</u>

Customer \_\_\_\_\_

# QUALITY WELL SERVICE, INC.

7175

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	7-11-19	Sec.	12	Twp.	30	Range	9	County	Kingman	State	Ks	On Location		Finish	
Lease	Amherst	Well No.	1	Location											
Contractor	Quality Well 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.	53							Depth							
Tbg. Size								Depth							
Tool								Depth							
Cement Left in Csg.								Shoe Joint							
Meas Line								Displace							
EQUIPMENT										Charge To					
										R+B oil + Gas					
										Street					
										City					
										State					
										The above was done to satisfaction and supervision of owner agent or contractor.					
										Cement Amount Ordered					
										1655r - Common					
Pumptrk										105r Gal on side					
Bulktrk										Common 165					
Bulktrk										Poz. Mix					
Pickup										Gel. #					
										Calcium 200					
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					
15' Pumped 105r Gal 355r Common										Sand					
32 CC @ 1400										Handling 177					
Washed 1.5 hrs logged cement @ 1310										Mileage 45					
										FLOAT EQUIPMENT					
										Guide Shoe					
2nd Pumped 355r Common cement @ 950'										Centralizer					
										Baskets					
										AFU Inserts					
3rd Pumped 955r Gamma cement @ 900' to surface										Float Shoe					
										Latch Down					
										LMV 45					
										Service Supervisor					
										Pumptrk Charge PTA					
										Mileage 90					
										Tax					
										Discount					
Signature										Total Charge					