KOLAR Document ID: 1471932

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 #:			ı	API No. 15	5 -			
Name:					Spot Description:			
Address 1:			Sec Twp S. R East West					
Address 2:					Feet from			
City:	State:	Zip:+		Feet from East / West Line of Section				
Contact Person:				Footages Calculated from Nearest Outside Section Corner:				
Phone: ()				· ·	NE NW	SE SW		
Type of Well: (Check one) Water Supply Well ENHR Permit #: Is ACO-1 filed? Yes Producing Formation(s): List A Depth to Depth to	Other: Gas Sto No If not, is well All (If needed attach another Top: Botto	SWD Permit #: rage Permit #: log attached? Yes		County: Lease Name: Well #: Date Well Completed: (Date) by: (KCC District Agent's Name) Plugging Commenced: Plugging Completed:				
Show depth and thickness of a	all water, oil and gas forma	ations.						
Oil, Gas or Water	Records		Casing F	asing Record (Surface, Conductor & Production)				
Formation	Content	Casing	Size		Setting Depth	Pulled Out		
Describe in detail the manner cement or other plugs were us	. 00					ds used in introducing it into the hole. If		
Plugging Contractor License #		Name: _	ame:					
Address 1:				dress 2:				
City:			State: +					
Phone: ()				-				
Name of Party Responsible fo	r Plugging Fees:							
State of	County, _	nty,		, SS.				
					nlovee of Operator or	Operator on above-described well,		
	(Print Name)			=[[[]	pioyee of Operator of	Operator on above-described well,		

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.



Service Order No. 2482

457 Yucca Lane • Pratt, Kansas 67124 • 620-388-5676 Company Client Order# Billing Address City State Zip Lease & Well # Field Name Legal Description (coordinates) County State Casing Size Casing Weight Fluid Level (surface) Reading from Customer T.D Excel Wireline T.D. Engineer Operator Operator Unit# **Product Code** Description Depth Qty **Unit Price** \$ Amount From To 9501 Received the above service according to the terms and conditions specified below, which we have read and to which we hereby agree. SUBTOTAL Customer DISCOUNT **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, **SUBTOTAL** 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 TAX 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 **NET TOTAL** 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.

(6) No employee is authorized to alter the terms or conditions of this agreement.

(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.

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QUALITY WELL SERVICE, INC. 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

	Sec.	Twp.	Range		County	State	On Location	Finish			
Date 7-9-19	19	31	8	Ha	(per	Ks					
Lease Trick	N	/ell No.	1	Locati	on						
Contractor Out 14	je II	Source		Owner							
Type Job PA					To Quality Well Service, Inc. You are hereby requested to rent cementing equipment and furnish						
Hole Size T.D.				cementer and helper to assist owner or contractor to do work as listed.							
Csg.	Depth			Charge To Jones of 4 Gos							
Tbg. Size	Depth			Street							
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 170 St. Common						
EQUIPMENT					10 34 601 on side						
Pumptrk S No.					Common						
Bulktrk No.					Poz. Mix						
Bulktrk No.					Gel. 1000 #						
Pickup No.					Calcium le dan #						
JOB SEI	RVICES	& REMA	RKS		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						
13+ Parpay 105x Col 35 5x					Sand						
Common cond 54 CC 70 1350					Handling 184						
Whiteer lister toggod (with 2 1200					Mileage 45						
(EUCa)	17			FLOAT EQUIPMENT							
210 Pringer	1 (00	umen cen	4	Guide Shoe							
26 11 to 950					Centralizer						
					Baskets						
Re Pungas 1	(6	ninden		AFU Inserts							
remet a 320 to surface					Float Shoe						
					Latch Down						
					LMV 45						
					Service Scheruscop						
					Pumptrk Charge						
				Mileage 9	0		Tunk				
						Tax					
						Discount					
X Signature			10.2	Total Charge							