

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.

(Print Name) Employee of Operator or 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.

Submitted Electronically

Quality Well Service, Inc.

Invoice

**PO Box 468
Pratt, KS 67124**

RECEIVED OCT 23 2019

Date	Invoice #
10/15/2019	C-2158

Bill To
McCoy Petroleum Corporation PO Box 39 Spivey KS 67142

P.O. No.	Terms	Lease Name
		JDM Farms A 1-35

Description	Qty	Rate	Amount
Common	84		
Poz	56		
Gel	1,982		
Calcium	150		
Plug	1		
Handling	163		
.08 * sacks * miles	11,410		
Service Supervisor	1		
LMV	70		
Heavy Equipment Mileage	140		
Customer Discount			
Discount Expires after 30 days from the date of the invoice			
JDM Farms A 1-35			
Stanton Co.			

Thank You for your business!	Subtotal
	Sales Tax
	Total

QUALITY WELL SERVICE, INC.

7238

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	10-9-19	Sec.	35	Twp.	30S	Range	41W	County	STANTON	State	Ks	On Location		Finish	
Lease	JMD FARM			Well No.	1-35			Location	Johnson Co Ks 11.5 S W13 into						
Contractor	QWS							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	7 7/8			T.D.	3573			Charge To	M/C CO2 PET. CO2						
Csg.	4 1/2			Depth				Street							
Tbg. Size				Depth				City	State						
Tool				Depth				The above was done to satisfaction and supervision of owner agent or contractor.							
Cement Left in Csg.				Shoe Joint				Cement Amount Ordered	140 sc 60/40 4% FEL						
Meas Line				Displace				EQUIPMENT							
Pumptrk								15 sc FEL 360 CC O/SIDE							
Bulktrk								Common 945K							
Bulktrk								Poz. Mix 5625							
Pickup								Gel. 1932 ^{lb}							
								Calcium 150 ^{lb}							
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							
Hool + C/L								Sand							
M/C Pump 50 sc 60/40 4% FEL w/ 200' holl.								Handling 163							
DISP 1120' + 2500' 2000'								Mileage 701 11/10							
1st Plug 1120' 15 sc 60/40 4% FEL								FLOAT EQUIPMENT							
M/C Pump 15 sc FEL								Guide Shoe							
M/C Pump 50 sc 60/40 4% FEL w/ 150 CC								Centralizer							
DISP 1120'								Baskets							
2nd Plug 600' 50 sc 60/40 4% FEL								AFU Inserts							
M/C Pump 50 sc 60/40 4% FEL w/ 150 CC								Float Shoe							
DISP 1120'								Latch Down							
3rd Plug 20'								SERVICE SUPPLY 11EA							
M/C Pump 40 sc 60/40 4% FEL w/ 150 CC								LWD 70							
C/L CUT TO PIT								Pumptrk Charge PTA							
Thank you								Mileage 140							
PLEASE CALL AGAIN								Tax							
TODD TS SALS BRADY KILMER DRECK								Discount							
Signature								Total Charge							