

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 OILWELL CEMENTING, INC.
 PO BOX 32 - 740 WEST WICHITA AVE, RUSSELL KS 67665
 PHONE: 785-324-1041 FAX: 785-483-1087
 EMAIL: cementing@ruraltel.net

Date: 10/11/2019
 Invoice # 1803
 P.O.#:
 Due Date: 11/10/2019
 Division: Russell

Invoice

Contact:
 Carmen Schmitt Inc
 Address/Job Location:

P.O. Box 47
 Great Bend Ks 67530

Reference:
 F ADAMS D 5

Description of Work:
 PLUG JOB

*710/43
 12330.0005
 Well File
 Cement to Plug*

Services / Items Included:	Quantity	Price	Taxable	Item	Quantity	Price	Taxable
Labor		\$ 675.02	Yes				
Common-Class A	210	\$ 3,272.96	Yes				
POZ Mix-Standard	140	\$ 741.45	Yes				
Bulk Truck Matl-Material Service Charge	375	\$ 283.72	Yes				
Premium Gel (Bentonite)	12	\$ 263.29	Yes				
Cottonseed Hulls	6	\$ 226.97	Yes				
Pump Truck Mileage-Job to Nearest Camp	42	\$ 142.99	Yes				
Bulk Truck Mileage-Job to Nearest Bulk Plant	42	\$ 111.22	Yes				

Invoice Terms:

Net 30

SubTotal: \$ 5,717.62
 Discount Available ONLY if Invoice is Paid & Received within listed terms of invoice: \$ (142.94)

SubTotal for Taxable Items: \$ 5,574.68
 SubTotal for Non-Taxable Items: \$ -

7.00% Rooks County Sales Tax

Total: \$ 5,574.68
 Tax: \$ 390.23

Thank You For Your Business!

Amount Due: \$ 5,964.91
Applied Payments:
Balance Due: \$ 5,964.91

Past Due Invoices are subject to a service charge (annual rate of 24%)
 This does not include any applicable taxes unless it is listed.
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QUALITY OILWELL CEMENTING, INC.

Federal Tax I.D.# 20-2886107

Phone 785-483-1071

Home Office P.O. Box 32 Russell, KS 67665

No. 1803

Cell 785-324-1041

Date	10-11-19	Sec.		Twp.		Range		County	Rock	State	KS	On Location		Finish	4:00 p.m.		
Lease								F. Adams D				Well No.		5	Owner		
Contractor								D S & W				To Quality Oilwell Cementing, 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								P.T.H.				Charge To		Carmen Schmidt			
Hole Size								5 1/2				T.D.					
Csg.								2 7/8				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 375 ^{60/40} 41.66L 500 # HULLS			
Meas Line								Displace				EQUIPMENT		Common			
Pumptrk								5				No. Cement Helper		210			
Bulktrk												No. Driver		140			
Bulktrk								13				No. Driver		12			
JOB SERVICES & REMARKS								Remarks: KCC Rich Williams				No. Driver		300# (6)			
Rat Hole												No. Driver		Salt			
Mouse Hole								Used 350 SK & 300# HULLS				No. Driver		Flowseal			
Centralizers												No. Driver		Kol-Seal			
Baskets												No. Driver		Mud CLR 48			
D/V or Port Collar								1st 3000 150 SK & 300# HULLS				No. Driver		CFL-117 or CD110 CAF 38			
								2nd 1800 150 SK Cement Grouted				No. Driver		Sand			
												No. Driver		Handling 375			
												No. Driver		Mileage			
												No. Driver		FLOAT EQUIPMENT			
												No. Driver		Guide Shoe			
												No. Driver		Centralizer			
												No. Driver		Baskets			
												No. Driver		AFU Inserts			
												No. Driver		Float Shoe			
												No. Driver		Latch Down			
												No. Driver		Pumptrk Charge plug			
												No. Driver		Mileage 42			
												No. Driver		Tax			
												No. Driver		Discount			
												No. Driver		Total Charge			
X Signature								Thanks									