

**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.

7244

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	10-17-19	Sec.	20	Twp.	19S	Range	23W	County	NESS	State	Ks	On Location		Finish	
Lease	MINER		Well No.	0WVO		Location	WESS CITY, KS S to 80 <sup>th</sup> rd								
Contractor	MOHEGAN WELL SERVICE						Owner	I E W I W I HO							
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.												
Csg.	4 1/2		Depth	4200		Charge To	OIL PRODUCERS INC OF KS								
Tbg. Size	2 3/8		Depth	4165		Street									
Tool			Depth												
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	160 5x 60/40 4 1/2 FEL								
<b>EQUIPMENT</b>															
Pumptrk	8	No.				Common	96 5x								
Bulktrk	7	No.				Poz. Mix	69 5x								
Bulktrk		No.				Gel.	550 <sup>#</sup>								
Pickup		No.				Calcium									
<b>JOB SERVICES &amp; REMARKS</b>															
Rat Hole	Hulls														
Mouse Hole	Salt														
Centralizers	Flowseal														
Baskets	Kol-Seal														
D/V or Port Collar	Mud CLR 48														
1 <sup>st</sup> Plug Tbg @ 4165'	CFL-117 or CD110 CAF 38														
Mix & Pump 10 5x 60/40 4 1/2 FEL	Sand														
Disg H2O	Handling 165														
PTOOH	Mileage 75 / 12375														
<b>FLOAT EQUIPMENT</b>															
2 <sup>nd</sup> Plug 1570'	Guide Shoe														
Mix & Pump 95 5x 60/40 4 1/2 FEL	Centralizer														
PTOOH	Baskets														
Hookup to 85/3	AFU Inserts														
Mix & Pump 30 5x 60/40 4 1/2 FEL 200 <sup>#</sup>	Float Shoe														
TOO OFF 4 1/2 csg 25 5x 60/40 4 1/2 FEL	Latch Down														
	SERVICE SIGN 1 EA														
	LAW 75														
	Pumptrk Charge PTA														
	Mileage 150														
THANK YOU TOMM TT													Tax		
PLEASE CALL AGAIN TONYE													Discount		
Signature <i>Kalvin Taylor</i>													Total Charge		