

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: 12/20/2019
 Invoice # 1912

P.O.#:
 Due Date: 1/19/2020
 Division: Russell

Invoice

ENTERED

Contact:
 KING OIL OPERATIONS
Address/Job Location:

1746 150th Avenue
 ELLIS KS 67637

Reference:
 HENRICKSON UNIT 1

Description of Work:
 PLUG JOB

Services / Items Included:	Quantity	Price	Taxable	Item	Quantity	Price	Taxable
Labor		\$ 675.02	Yes				
Common-Class A	162	\$ 2,524.86	Yes				
POZ Mix-Standard	108	\$ 571.97	Yes				
Premium Gel (Bentonite)	20	\$ 438.82	Yes				
Cottonseed Hulls	10	\$ 378.29	Yes				
Bulk Truck Matl-Material Service Charge	350	\$ 264.80	Yes				
Pump Truck Mileage-Job to Nearest Camp	18	\$ 61.28	Yes				
Bulk Truck Mileage-Job to Nearest Bulk Plant	18	\$ 47.66	Yes				

Invoice Terms:

Net 30

SubTotal: \$ 4,962.70
 Discount Available ONLY if Invoice is Paid & Received within listed terms of invoice: \$ (124.07)

SubTotal for Taxable Items: \$ 4,838.64
 SubTotal for Non-Taxable Items: \$ -

6.50% Ellis County Sales Tax

Total: \$ 4,838.63
 Tax: \$ 314.51
Amount Due: \$ 5,153.14
Applied Payments:
Balance Due: \$ 5,153.14

Thank You For Your Business!

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
Cell 785-324-1041

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

No. 1912

Date	17-20-19	Sec.		Twp.		Range		County	Ellis	State	KS	On Location		Finish	11.30 AM
Lease								Location		D131N 1 1/2E S1110					
Lease								Well No.		1					
Contractor								Owner							
Type Job								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.							
Hole Size								T.D.		Charge To					
Csg.								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					
Meas Line								Displace		10 gal 1500# Hulls					
EQUIPMENT												Common			
Pumptrk		No.		Cementer		Helper		Poz. Mix				Gel.			
Bulktrk		No.		Driver		Driver		Calcium							
JOB SERVICES & REMARKS												Hulls			
Remarks:								Salt							
Rat Hole								Flowseal							
Mouse Hole								Kol-Seal							
Centralizers								Mud CLR 48							
Baskets								CFL-117 or CD110 CAF 38							
D/V or Port Collar								Sand							
1 st 3590								Handling							
2 nd 2125								Mileage							
3 rd 1125								FLOAT EQUIPMENT							
5/2 - 15 SK								Guide Shoe							
Hulls 55K 300#								Centralizer							
15 SK								Baskets							
270K 10 gal 500# Hulls								AFU Inserts							
Hulls								Float Shoe							
Hulls								Latch Down							
Hulls								Pumptrk Charge							
Hulls								Mileage							
Hulls								Tax							
Hulls								Discount							
Hulls								Total Charge							
Signature															