

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 Wireline Service LLC

**PO Box 468
Pratt, KS 67124**

Invoice

Date	Invoice #
8/18/2020	870

Bill To
Vincent Oil Corporation 200 W. Douglas, Ste. 725 Wichita, KS 67202

P.O. No.	Terms	Lease Name
		Close #1-3

Description	Qty	Rate	Amount
4 1/2" Bridge Plug	1	1,450.00	1,450.00T
Dump Bailer Cement Run	1	750.00	750.00T
Truck Charge	1	1,500.00	1,500.00T
Customer Discount		-1,950.00	-1,950.00
Discount expires after 30 days from the date of the invoice.		0.00	0.00
Close #1-3			
Ford Co			

Thank you for your business.	Subtotal	\$1,750.00
	Sales Tax (7.65%)	\$133.88
	Total	\$1,883.88

Quality Wireline Service LLC

**PO Box 468
Pratt, KS 67124**

Invoice

Date	Invoice #
8/24/2020	875

Bill To
Vincent Oil Corporation 200 W. Douglas, Ste. 725 Wichita, KS 67202

P.O. No.	Terms	Lease Name
		Close 1-3

Description	Qty	Rate	Amount
4 1/2 Collar Shot	1	1,200.00	1,200.00T
Truck Charge	1	1,500.00	1,500.00T
Customer Discount		-1,450.00	-1,450.00
Discount expires after 30 days from the date of the invoice.		0.00	0.00
Close 1-3			
Ford Co			

Thank you for your business.	Subtotal	\$1,250.00
	Sales Tax (7.65%)	\$95.63
	Total	\$1,345.63

Quality Well Service, Inc.

**PO Box 468
Pratt, KS 67124**

Invoice

Date	Invoice #
8/24/2020	C-2403

Bill To
Vincent Oil Corporation 200 W. Douglas, Ste. 725 Wichita, KS 67202

P.O. No.	Terms	Lease Name
		Close 1-3

Description	Qty	Rate	Amount
Common	80	15.50	1,240.00T
Poz	55	9.50	522.50T
Gel	2,000	0.22	440.00T
Calcium	100	1.20	120.00T
Plug/Pump Charge	1	950.00	950.00T
Handling	157	2.10	329.70T
.08 * sacks * miles	10,205	0.08	816.40T
Service Supervisor	1	150.00	150.00T
LMV	65	3.75	243.75T
Heavy Equipment Mileage	130	8.00	1,040.00T
Customer Discount		-2,048.33	-2,048.33
Discount Expires after 30 days from the date of the invoice		0.00	0.00
Close 1-3			
Ford Co			

Thank You for your business!	Subtotal	\$3,804.02
	Sales Tax (7.65%)	\$291.01
	Total	\$4,095.03

QUALITY WELL SERVICE, INC.

7482

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	7-19-20	Sec.	3	Twp.	29	Range	23	County	Ford	State	KS	On Location	Finish
Lease	Close	Well No.	1-3		Location								
Contractor	Quality Well Service				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					T.D.								
Csg.	4.5				Depth				Charge To				
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				
EQUIPMENT								15sx gel on side					
Pumptrk	3	No.							Common				
Bulktrk	710	No.							Poz. Mix				
Bulktrk		No.							Gel.				
Pickup		No.							Calcium				
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					
1 st Pumped 15sx 6el 50sx 60/40 4 1/2 gel @ 1560								Sand					
								Handling					
								Mileage					
2nd Pumped 50sx 60/40 4 1/2 gel @ 720								FLOAT EQUIPMENT					
								Guide Shoe					
								Centralizer					
3rd Pumped 35sx 60/40 4 1/2 gel @ 40' to surface.								Baskets					
								AFU Inserts					
								Float Shoe					
								Latch Down					
								LMV 65					
								Service Supervisor					
								Pumptrk Charge					
								Mileage					
								Tax					
								Discount					
X Signature								Total Charge					