## KOLAR Document ID: 1573156

**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 #:	API No. 15
Name:	Spot Description:
Address 1:	Sec Twp S. R East West
Address 2:	Feet from North / South Line of Section
City: State: Zip: +	Feet from East / West Line of Section
Contact Person:	Footages Calculated from Nearest Outside Section Corner:
Phone: ( )	NE NW SE SW
Type of Well: (Check one)  Oil Well  Gas Well  OG  D&A  Cathodic    Water Supply Well  Other:  SWD Permit #:  SWD Permit #:	County: Well #: Lease Name: Well #: Date Well Completed:
Is ACO-1 filed? Yes No If not, is well log attached? Yes No	The plugging proposal was approved on: (Date)
Producing Formation(s): List All (If needed attach another sheet)	by: (KCC <b>District</b> Agent's Name)
Depth to Top: Bottom: T.D	Plugging Commenced:
Depth to Top: Bottom: T.D	Plugging Completed:
Depth to Top: Bottom: T.D	

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

QUALI		LCE		NG, IN	C.		
Phone 785-483-1071 Cell 785-324-1041	Home Office P.O. E			No.	2291		
Date 5-3-21	<i>D</i> ,	County hillias	State KS	On Location	Finish		
Lease ESackson	Locat	ion Glade	3W 200RD	3411 119:	uto		
Lease EDGCK50n	Well No.	Owner					
Contractor C B		To Quality Oilwe	ell Cementing, Inc.				
Type Job T.A		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 R. P. Nixon					
<u>Csg.</u> 412	Depth	Street					
Tbg. Size 2 -3/8	Depth	City		State			
Tool	Depth	The above was d	one to satisfaction and		acont or contractor		
Cement Left in Csg.	Shoe Joint	Cement Amoun	t Ordered 425	140 4.14E	agent of contractor.		
Meas Line	Displace	tocate	500 # HUS	15			
	IENT	Common 14	,	2			
Pumptrk Heiper	6	Poz. Mix 94	1				
Bulktrk No. Driver	2	Gel. 8					
Bulktrk 19 No. Driver Drug		Calcium					
JOB SERVICES	& REMARKS	Hulls 500 #	4 (10)				
Remarks: KCC Pat Bedo.	50	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					
151 3080 755	K 250# HULS	Handling 42	< ───				
2W	K 1000 Hous	Mileage	<u></u>				
240 1101	Sh iso # Wills		FLOAT EQUIPMEN	T			
Coment inculation	and a second	Guide Shoe	LOAT LOUFMEN				
		Centralizer					
412-10 SK	- TOPON	Baskets					
Annolis (emented SI							
		Float Shoe					
		Latch Down					
(1/SED 235KK	2 SOOTH HUILS )	Later Down					
Contraction of the second seco	a ganna alla						
	Pumptrk Charge						
	<u></u>	Mileage 57	pluc				
				COD	V		
			120	Discount			
X Signature Brev Pohl	The	awer F	Total Charge				
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