

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: 7/6/2021
 Invoice # 2314

P.O.#:

Due Date: 8/5/2021

Division: Russell

Invoice

Contact:

Address/Job Location:

James Productn
 1334 Grouse Rd.
 Yates Center KS
 66783

Reference:
 KU ENDOWMENT 17-1 SEC 17-7-27

Description of Work:
 PLUG JOB

Services / Items Included:	Quantity	Price	Taxable	Item	Quantity	Price	Taxable
Labor		\$ 684.02	Yes				
Common-Class A	144	\$ 2,274.24	Yes				
POZ Mix-Standard	96	\$ 515.20	Yes				
Premium Gel (Bentonite)	9	\$ 200.10	Yes				
Bulk Truck Matl-Material Service Charge	240	\$ 184.00	Yes				
Flo Seal	60	\$ 92.00	Yes				
Dry Hole Plug	1	\$ 64.40	Yes				
Pump Truck Mileage-Job to Nearest Camp	15	\$ 51.75	Yes				
Bulk Truck Mileage-Job to Nearest Bulk Plant	15	\$ 40.25	Yes				

Invoice Terms:

Net 30

SubTotal: \$ 4,105.96
 Discount Available ONLY if Invoice is Paid & Received within listed terms of invoice: \$ (102.65)

SubTotal for Taxable Items:	\$ 4,003.31
SubTotal for Non-Taxable Items:	\$ -
Total:	\$ 4,003.31
Tax:	\$ 340.28

8.50% Sheridan County Sales Tax

Thank You For Your Business!

Amount Due: \$ 4,343.59
Applied Payments:
Balance Due: \$ 4,343.59

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. 2311

Date	Sec.	Twp.	Range	County	State	On Location	Finish
7-6-21	17	7	27W	Sheldon	Ks		18:00 AM

Location *Marie S N 5 E 3 W*

Lease <i>RUF Adornment</i>	Well No. <i>17-1</i>	Owner
Contractor <i>STP</i>		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 <i>BTA</i>		Charge To <i>James Production</i>
Hole Size <i>7 3/8</i>	T.D.	Street <i>1334 Front Grover Rd.</i>
Csg.	Depth	City <i>Yates Center</i> State <i>Ks</i> <i>66703</i>
Tbg. Size <i>4 1/2</i>	Depth	
Tool	Depth	The above was done to satisfaction and supervision of owner agent or contractor.
Cement Left in Csg.	Shoe Joint	Cement Amount Ordered <i>2404 60/40 4% Gel</i>
Meas Line	Displace	<i>1/4" F10 Seal</i>

EQUIPMENT

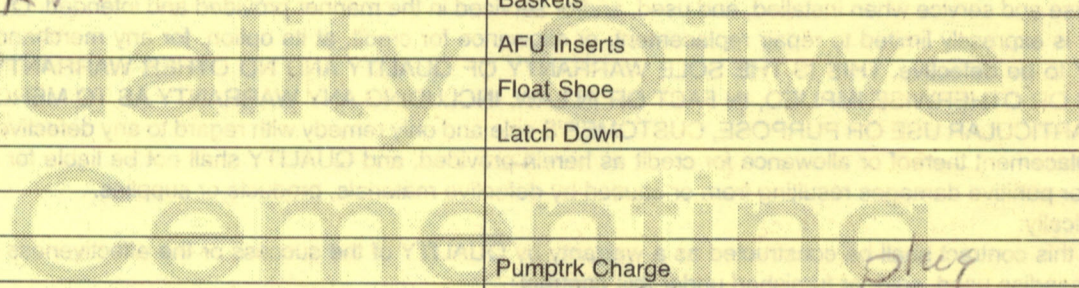
Pumptrk <i>5</i>	No.	Cement Helper	<i>Bill Craig</i>	Common <i>144</i>
Bulktrk	No.	Driver		Poz. Mix <i>96</i>
Bulktrk <i>9</i>	No.	Driver	<i>Doug</i>	Gel. <i>9</i>
	No.	Driver		Calcium

JOB SERVICES & REMARKS

Remarks:	Hulls
Rat Hole	Salt
Mouse Hole <i>30M</i>	Flowseal <i>60#</i>
Centralizers	Kol-Seal
Baskets	Mud CLR 48
D/V or Port Collar	CFL-117 or CD110 CAF 38
<i>2446 - 50M</i>	Sand
<i>1620 - 100M</i>	Handling <i>240</i>
<i>332 50M</i>	Mileage

FLOAT EQUIPMENT

<i>10 40</i>	Guide Shoe
<i>30M RH</i>	Centralizer
	Baskets
	AFU Inserts
	Float Shoe
	Latch Down



	Pumptrk Charge <i>plug</i>	Tax
	Mileage <i>15 (min)</i>	Discount
<i>John</i>		Total Charge

Thanks