

**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.**

**Invoice**

**PO Box 468  
Pratt, KS 67124**

Date	Invoice #
7/22/2021	C-2654

Bill To
Prater Oil & Gas Operations Inc. 10356 Bluestem Blvd. Pratt Ks. 67124

P.O. No.	Terms	Lease Name
		Johnson B-1

Description	Qty	Rate	Amount
Common	204	15.50	3,162.00T
Poz	136	9.50	1,292.00T
Gel	1,170	0.22	257.40T
Hulls	1	54.00	54.00T
Plug/Pump Charge	1	950.00	950.00T
Handling	352	2.10	739.20T
.08 * sacks * miles	10,560	0.08	844.80T
LMV	30	3.75	112.50T
Heavy Equipment Mileage	60	8.00	480.00T
Customer Discount		-2,762.16	-2,762.16
Discount Expires after 30 days from the date of the invoice		0.00	0.00
Johnson B-1 Edwards Co.			

PLEASE REMIT TO ABOVE COMPANY & ADDRESS! Thank you for your business!

<b>Subtotal</b>	\$5,129.74
<b>Sales Tax (7.5%)</b>	\$384.73
<b>Total</b>	\$5,514.47

# QUALITY WELL SERVICE, INC.

7710

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	Sec.	Twp.	Range	County	State	On Location	Finish
7-20-21	17	25S	16W	EDWARDS	KS		
Lease Johnson	Well No. B-1	Location BELPRE S to PRD 1/2 W 1/2 N E 1/4					
Contractor 49 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 7 7/8	T.D.			Charge To FROTEX OIL GAS			
Csg. 4 1/2	Depth			Street			
Tbg. Size 2 3/8	Depth			City State			
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 350 sc 60/40 4 1/2 GEL			
<b>EQUIPMENT</b>				100' hulls 150 390 sc			
Pumptrk 8 No.				Common 209 sc			
Bulktrk 7 No.				Poz. Mix 136 sc			
Bulktrk No.				Gel. 1170 "			
Pickup No.				Calcium			
<b>JOB SERVICES &amp; REMARKS</b>				Hulls 100 "			
Rat Hole				Salt			
Mouse Hole				Flowseal			
Centralizers				Kol-Seal			
Baskets	CORSET 1128'			Mud CLR 48			
D/V or Port Collar	PEAFI 1120-550			CFL-117 or CD110 CAF 38			
Hook up for 4 1/2 csg.				Sand			
Loss Hole 1' psi test 15 3/4 300' HULLS				Handling 352			
1st Plug 11150'				Mileage 301 10,560			
W/L Pump 25 sc 60/40 4 1/2 GEL close 4 1/2				<b>FLOAT EQUIPMENT</b>			
W/L Pump 25 sc 60/40 4 1/2 GEL 100' hulls				Guide Shoe			
D/V				Centralizer			
2nd Plug 11500'				Baskets			
W/L Pump 100 sc 60/40 4 1/2 GEL				AFU Inserts			
CUC on 4 1/2 close VALVE				Float Shoe			
W/L Pump 175 sc 60/40 4 1/2 GEL				Latch Down			
CUC on 1' 8 1/2				SERVICE SQUIP 11 EA			
PTOOL				LMV 30			
TOP OF 4 1/2 15 sc				Pumptrk Charge PTA			
				Mileage 60			
THANK YOU PLEASE CALL AGAIN TOMORROW MORNING							
Signature						Tax	
						Discount	
						Total Charge	