

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

Form CP-4
March 2009

Type or Print on this Form
Form must be Signed
All blanks must be Filled

WELL PLUGGING RECORD
K.A.R. 82-3-117

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.

7764

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
9-15-21	8	26S	24W	FOOD	KI		
Lease Lix	Well No. 1-8	Location WRIGHT, KS 3 E to 114th Rd					
Contractor DUKE DRIG RIG #1	Owner I.S. N. Winto			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.			
Type Job SURFACE	T.D. 400'			Charge To VINCENT OIL Corp			
Hole Size 17 1/4	Depth 399'			Street			
Csg. 85/8 23'	Depth			City State			
Tbg. Size	Depth			City State			
Tool	Shoe Joint 30			The above was done to satisfaction and supervision of owner agent or contractor.			
Cement Left in Csg.	Displace 23.62			Cement Amount Ordered 350 lbs Common			
Meas Line	EQUIPMENT			2% GEL 3% CL 1/2" P/S USED 275			
Pumptrk 8 No.	Common 275 SI						
Bulktrk 12 No.	Poz. Mix						
Bulktrk No.	Gel. 517*						
Pickup No.	Calcium 776"						
JOB SERVICES & REMARKS				Hulls			
Rat Hole				Salt			
Mouse Hole				Flowseal 138'			
Centralizers				Kol-Seal			
Baskets				Mud CLR 48			
D/V or Port Collar				CFL-117 or CD110 CAF 38			
Rai 9-H's 85/8 23" CSG SET @ 399'				Sand			
START CSG CSG ON Bottom				Handling 296			
Hook up to csg & Break circ w/dig				Mileage 50/350			
START Pumping H2O				85/8 FLOAT EQUIPMENT			
START MK: Pump, 5x Common				Guide Shoe H&M 1 EA			
2% GEL 3% CL 1/2" P/S 14.8" ONC				Centralizer 85/8 WOODEN Plug 1 EA			
SHUT DOWN RELEASE 85/8 WP				Baskets			
START DISP				AFU Inserts			
Plck down @ 23.62 Rbls total				Float Shoe			
Close Valve on CSG 150"				Latch Down			
Good circ thru JBS				SERVICE Srv 1 EA			
CIRC OFF TO PIT				Pumptrk Charge SURFACE			
I THANK YOU				Mileage 100			
PLEASE CALL AGAIN				Tax			
TODD, MIKE,				Discount			
mike				Total Charge			
Signature							

QUALITY WELL SERVICE, INC.

7771

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Fax 620-672-3663

Rich's Cell 620-727-3409
Brady's Cell 620-727-6964

Date	9-24-21	Sec.	B	Twp.	26S	Range	24W	County	Foreo	State	Ks	On Location		Finish	
Lease	LIX	Well No.	1-8			Location: Weights, Ks W to 114 th St									
Contractor	DUKE DRUG R.G.M.							Owner: N.L.M. Winko							
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.			5070								
Csg.	4 1/2 DP			Depth			Charge To: VINCENT OIL CORP								
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 220 SK 60/40								
EQUIPMENT										4 1/2 GEL 1/4" PS					
Pumptrk	8 No.						Common 132 SK								
Bulktrk	15 No.						Poz. Mix 88 SK								
Bulktrk	No.						Gel. 757 ⁴								
Pickup	No.						Calcium								
JOB SERVICES & REMARKS										Hulls					
Rat Hole	30 SK						Salt								
Mouse Hole	20 SK						Flowseal 55 ⁴								
Centralizers							Kol-Seal								
Baskets							Mud CLR 48								
D/V or Port Collar							CFL-117 or CD110 CAF 38								
1st Plug 2 14.70'										Sand					
Pump H ₂ O										Handling 229					
Mix: Pump 50 SK 60/40 4 1/2 GEL 1/4" PS										Mileage 50					
Disp H ₂ O										FLOAT EQUIPMENT					
2nd Plug 2 950'										Guide Shoe					
Pump H ₂ O										Centralizer					
Mix: Pump 50 SK 60/40 4 1/2 GEL 1/4" PS										Baskets					
Disp H ₂ O										AFU Inserts					
3rd Plug 2 440'										Float Shoe					
Pump H ₂ O										Latch Down					
Mix: Pump 50 SK 60/40 4 1/2 GEL 1/4" PS										SERVICE SW 1 EA					
Disp H ₂ O										Pumptrk Charge PTA					
4th Plug 2 60'										Mileage 100					
20 SK 60/40 4 1/2 GEL 1/4" PS															
Plug R.M. Holes															
THANK YOU PLEASE CALL AGAIN TOMORROW															
Signature: [Signature]															
										Tax					
										Discount					
										Total Charge					