

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.

(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

QUALITY OILWELL CEMENTING, INC.

Federal Tax I.D.# 20-2886107

Phone 785-483-1071

Home Office P.O. Box 32 Russell, KS 67665

No. 2906

Cell 785-324-1041

Date	6-28-22	Sec.	11	Twp.	14	Range	14	County	Russell	State	KS	On Location		Finish	2:45 PM
Lease	Leo Boxberger							Well No.	#9	Location Russell 25 Turn east + N Int					
Contractor	S+C well Service							Owner 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	plug							Charge To War Cry LLC.							
Hole Size								T.D.							
Csg.	7"							Depth							
Tbg. Size	27/8"							Depth							
Tool								Depth							
Cement Left in Csg.								The above was done to satisfaction and supervision of owner agent or contractor.							
Meas Line								Shoe Joint							
EQUIPMENT								Cement Amount Ordered 450 60/40 4L Gel							
Pumptrk	18	No.	Cement	David	Rick	Common 265									
Bulktrk	13	No.	Driver	Clayton	Robert	Poz. Mix 175									
Bulktrk	19	No.	Driver	Jordan		Gel. 28									
JOB SERVICES & REMARKS								Calcium							
Remarks:	2995' - 1300# Gel							Hulls 500#(10)							
Rat Hole	100 SX 200 # Hulls							Salt							
Mouse Hole								Flowseal							
Centralizers	1450' - 125 SX 200 # Hulls							Kol-Seal							
Baskets								Mud CLR 48							
D/V or Port Collar	730' - Circulate 7"							CFL-117 or CD110 CAF 38							
to Surface w/ 180 SX closed valve								Sand							
+ pump 20 SX move on 10 3/4"								Handling 463							
10 3/4" Did Not Circulate								Mileage							
PT off + Top off 7" w/ 10 SX								FLOAT EQUIPMENT							
pump 15 SX down backside								Guide Shoe							
Cement did Circulate								Centralizer							
used 440 SX 13g. 500# Hull								Baskets							
								AFU Inserts							
								Float Shoe							
								Latch Down							
								Pumptrk Charge plug							
								Mileage 15 (m/m)							
								Thanks							
X Signature [Signature]								Tax							
								Discount							
								Total Charge							