KOLAR Document ID: 1665060

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 #:			 AP	Pl No. 1	5						
Name:					Spot Description:						
Address 1:					SecTwp S. REastWe						
Address 2:					Feet from North / South Line of Section						
City:	State:	Zip: +	_	Feet from East / West Line of Section							
Contact Person:			Fo	Footages Calculated from Nearest Outside Section Corner:							
Phone: ()				NE NW SE SW							
Type of Well: (Check one)		OG D&A Cathodic	Co	County: Well #:							
ENHR Permit #:	Gas Sto	rage Permit #:		Date Well Completed:							
Is ACO-1 filed? Yes	No If not, is well	log attached? Yes	I I	The plugging proposal was approved on: (Date)							
Producing Formation(s): List A	II (If needed attach another	sheet)	by:	by: (KCC District Agent's Name)							
Depth to	Top: Botton	m: T.D	_{Pli}	Plugging Commenced:							
Depth to	Top: Botto	m: T.D		Plugging Commenced: Plugging Completed:							
Depth to	Top: Botto	m:T.D		Tridgging Completed.							
Show depth and thickness of a	all water, oil and gas forma	ations.									
Oil, Gas or Water	Records		Casing Reco	rd (Surf	ction)						
Formation	Content	Casing	Size		Setting Depth	Pulled Out					
cement or other plugs were us		•	•			ds used in introducing it into the hole. If					
Plugging Contractor License #: Nam					:						
Address 1:			Address 2:								
City:			Sta	ate:		Zip:+					
Phone: ()											
Name of Party Responsible for	r Plugging Fees:										
State of	County, _		, s	is.							
					nployee of Operator or	Operator on above-described well,					
(Print Name)				'	ipioyee of Operator of	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.

QUALITY CILWELL 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. 2994

Date 4-11-22	Sec.	Twp.	Range	County		State		On Location		Finish AM		
Date 1 01 0		1 11		Location		Keena	· · · ·	1	BR	,,,,,	65 C)	崖
Lease Albe	1	ſ	Well No. 1-3	Locan	1	1,	No		into	` }-^	3	1 300
. ~ 6		MU	vveir ivo.		To Quality O	ilwell Cementing	, Inc.			,		***********
_1	ver y	1			You are here cementer and	by requested to d helper to assis	rent cer t owner	menting eq	uipment tor to do	and fu	ırnish as liste	:d.
Type Job Diver)"B"	T.D.	38501		Charge ()	holla	Pro	1 2/2	n			may a managar panama di magama
Csg.		Depth			Street						~,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
Tbg. Size 4%	. P'S	Depth	<u> 1750'</u>		City		S	State				
Tool		Depth				s done to satisfact			of owner	agent o	r contra	ctor.
Cement Left in Csg.		Shoe J	oint	.1	Cement Amo	ount Ordered 2	<u>'55</u>	60/40	4%	Gel	147	· Eho
Meas Line		Displac	· H20/1	Mud	<u> </u>							
	EQUIPN	/IENT	,		Common / 2	<u> </u>				,		
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Bulktrk P.W. Driv		χ_{ℓ}			Calcium			·····				
JOB	SERVICES	& REMA	RKS		Hulls			·				
Remarks: 1750		<u>50 3</u>)	χ		Salt						,	
Rat Hole 875	- 1	<u> ১</u> ৩ ১)	9		Flowseal _5	0#						
Mouse Hole 300	' - 5	io 27	(Kol-Seal	***************************************						· ·
Centralizers 46'	- 10	5X			Mud CLR 48							·
Baskets Kath	whe -	- 37	5X	5	CFL-117 or (CD110 CAF 38						
D/V or Port Collar 🏠	ouseh	wle -	155X		Sand							
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X Signature	:				11 WU	· · ·		Total C	Charge			
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