

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.

Federal Tax I.D.# 20-2886107

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

No. 3159

Phone 785-483-1071
Cell 785-324-1041

Date	9-15-22	Sec.	14	Twp.	7	Range	23	County	Graham	State	KS	On Location		Finish	11:30 AM	
Lease	Fowles							Location	Hill City N to W Rd 3/4 W							
Well No.	14-1		Owner	S/into												
Contractor			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	Bullhead plug		Charge To	H+C oil												
Hole Size	5 1/2"		T.D.													
Csg.	Depth		Street													
Tbg. Size	Depth		City	State												
Tool	Depth		The above was done to satisfaction and supervision of owner agent or contractor.													
Cement Left in Csg.	Shoe Joint		Cement Amount Ordered	350 60/40 4% bel												
Meas Line	Displace		1200 # Gel	300 # Hulls												
EQUIPMENT			Common	150												
Pumptrk	17	No.	Cementer	Nick		Rick		Poz. Mix	100							
Bulktrk	21	No.	Driver	Tim		Cory		Gel.	21							
Bulktrk		No.	Driver	Bryant				Calcium								
JOB SERVICES & REMARKS			Hulls	300 # (6)												
Remarks:			Salt													
Rat Hole			Flowseal													
Mouse Hole			Kol-Seal													
Centralizers			Mud CLR 48													
Baskets			CFL-117 or CD110 CAF 38													
D/V or Port Collar			Sand													
Hook to 5 1/2" + pump 505x			Handling	350												
300 # Hulls 1200 # gel + pump			Mileage													
200 # Cement. Locked up			FLOAT EQUIPMENT													
Held 500 #.			Guide Shoe													
Back side was full @ 300#			Centralizer													
5 1/2" stayed full			Baskets													
Used 250 # 1200 # gel			AFU Inserts													
300 # Hulls			Float Shoe													
			Latch Down													
			Pumptrk Charge	plug												
			Mileage	40												
			Thanks													
X Signature			Bob Mont												Tax	
													Discount			
													Total Charge			