

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. 3160

Phone 785-483-1071

Cell 785-324-1041

Date	9-15-22	Sec.	4	Twp.	7	Range	23	County	Graham	State	Ks	On Location		Finish	1:15 PM				
Lease								Worcester		Well No.		41		Owner		S.H.M.			
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.		Street							
Csg.								Depth		City						State			
Tbg. Size								Depth		The above was done to satisfaction and supervision of owner agent or contractor.									
Tool								Depth		Cement Amount Ordered						350 60/40 4% Gel			
Cement Left in Csg.								Shoe Joint		1200 # Gel - 300 # Hulls									
Meas Line								Displace		EQUIPMENT									
Pumptrk								17 No.		Cementer		Nick		Rick		Common		168	
Bulktrk								19 No.		Driver		Bryant				Poz. Mix		112	
Bulktrk								No.		Driver		Tim		Coccy		Gel.		20	
JOB SERVICES & REMARKS										Hulls						200 # (4)			
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									
Part on 5 1/2" Swage pump										Handling						350			
505x Cement w/ 200# Hulls										Mileage									
1000# gel 225 5x Cement										FLOAT EQUIPMENT									
800# PSI										Guide Shoe									
Backside 5 5x @ 300#										Centralizer									
5 1/2" stayed full										Baskets									
Used 280 sp / 1000 # gel										AFU Inserts									
200 # Hulls										Float Shoe									
Pumptrk Charge										Latch Down									
Mileage										Pumptrk Charge						Plug			
Signature								Bob Plant		Mileage						40			
										Thanks									
										Tax									
										Discount									
										Total Charge									