KOLAR Document ID: 1668718

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 #:				API No.	15			
Name:				Spot Description:				
Address 1:			.	Sec Twp S. R East West				
Address 2:				Feet from North / South Line of Section				
City:	State:	Zip: +	.	Feet from East / West Line of Section				
Contact Person:				Footages Calculated from Nearest Outside Section Corner:				
Phone: ()					NE NW	SE SW		
Type of Well: (Check one)		OG D&A Cathodi SWD Permit #:		County: Well #:				
ENHR Permit #:	Gas Sto	rage Permit #:		Date Well Completed:				
Is ACO-1 filed? Yes	No If not, is well	log attached? Yes		The plugging proposal was approved on: (Date)				
Producing Formation(s): List A	ll (If needed attach another	sheet)				(KCC District Agent's Name)		
Depth to	Top: Botto	m: T.D		Plugging Commenced:				
Depth to	Top: Botto	m: T.D		00 (•			
Depth to	Top: Botto	'	i iuggiiis	g completed.				
Show depth and thickness of a	all water, oil and gas forma	ations.						
Oil, Gas or Water	Records		Casing Re	cord (Su	urface, Conductor & Produc	tion)		
Formation	Content	Casing	Size		Setting Depth	Pulled Out		
Describe in detail the manner cement or other plugs were us		_				Is used in introducing it into the hole. If		
Plugging Contractor License #		Name:	ie:					
Address 1: Addre					s 2:			
City:		;	State:		Zip:+			
Phone: ()								
Name of Party Responsible fo	r Plugging Fees:							
State of			, SS.					
	•				Employee of Operator or	Operator on above described		
(Print Name)					imployee 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.

QUALITY OILWELL 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. ប្រជាក្នុ

Losse Well No. Contractor Type Job 77 Contractor Type Job 77 Contractor Type Job 77 Contractor Contractor Type Job 77 Contractor Contractor Type Job 77 Contractor Cont	3	Sec.	Twp.	Range	(County	State	On Location	Finish			
Lease Well No.	Date 8-2-22	- st	-		BA	CHOL "	45					
Contractor Type Job FT A To Quality Oliwell Comenting, Inc. You are hereby roquested to rent cementing equipment and furnish cementer and helper to assist owner or contractor to do work as listed. Charge To Cag. Depth The Stree Depth The above was done to satisfaction and supervision of owner agent or contractor. Cement Left in Csg. Shoe Joint Cement Amount Ordered Displace FOUIPMENT Common Pumptrk No Common Pumptrk No Common Pumptrk No Common Pumptrk No Common Portiver Gel. Displace Fouipment Gel. D	Location BANG 1252W ISIWE											
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