KOLAR Document ID: 1674051

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) C Water Supply Well C ENHR Permit #:				County: Well #: Date Well Completed: (Date) The plugging proposal was approved on: (Date)						
Is ACO-1 filed? Yes	No If not, is well	log attached? Yes	No							
Producing Formation(s): List A	ll (If needed attach another	sheet)		by: (KCC District Agent's Name)						
Depth to	Top: Botto	m: T.D		Plugging Commenced:						
Depth to	Top: Botto	m: T.D		Plugging Commenced:						
Depth to	Top: Botto	m: T.D		1 14991119	g completed.					
Show depth and thickness of a	all water, oil and gas forma	ations.					—			
Oil, Gas or Water	Oil, Gas or Water Records				Casing Record (Surface, Conductor & Production)					
Formation	Content	Casing	Size		Setting Depth	Pulled Out	\dashv			
							-			
							_			
Describe in detail the manner cement or other plugs were us						ds used in introducing it into the hol	e. If			
Plugging Contractor License #:				lame:						
Address 1:			Address 2	!:						
City:				State:		Zip:+				
Phone: ()										
Name of Party Responsible for	r Plugging Fees:									
State of	County, _			, ss.						
				E	mployee of Operator or	Operator on above-described v	vell,			

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.

8072

QUALITY WELL SERVICE, INC.

Federal Tax I.D. # 481187368
Home Office 30060 N. Hwy 281, Pratt, KS 67124
Mailing Address P.O. Box 468

Office 620-786-6992 Fax 620-672-3663 Todd's Cell 620-388-4967 Brady's Cell 620-727-6964

Sec.	Twp.	Range	County		State	On Location	Finish		
Date 8.27-22 24	3/5	13W	GARBER		Ks				
12 1	Well No.	1	Location	on SAWYER KIS to Elm Mills W to					
Contractor Fossil D	t:	Owner Mingana Rd 6.35 Wint							
Type Job PM		To Quality Well Service, Inc.							
Hole Size 7 7/3 T.D. 4701				You are hereby requested to rent cementing equipment and furnish cementer and helper to assist owner or contractor to do work as listed.					
Csg. Depth			Charge PARKARO LYNN						
Tbg. Size 41/2 DP Depth 4621			Street						
Tool Depth			City State						
Cement Left in Csg. Shoe Joint			The above was done to satisfaction and supervision of owner agent or contractor.						
Meas Line Displace			Cement Amount Ordered Z20 & 60/40 Poz						
EQUIP		41. GEL 1/41/4 PS							
Pumptrk 8 No.				Common /325					
Bulktrk /O No.				Poz. Mix 8854					
Bulktrk No.				Gel. 7.57 H					
Pickup No.				Calcium		, j			
JOB SERVICES & REMARKS				Hulls					
Rat Hole 30 4				Salt					
Mouse Hole 20 9		×		Flowseal 55 #					
Centralizers		4		Kol-Seal					
Baskets				Mud CLR 48					
D/V or Port Collar				CFL-117 or CD110 CAF 38					
15T Plu60 4621 5046	0/40 4%	GEL 1/4" P	15	Sand					
Pump HZo		•		Handling 223					
Mix & Pump 50x 6040 4/1 (EL 1/4" PS				Mileage 35 / 7980					
Remo HZo				FLOAT EQUIPMENT					
Oiso muo		Guide Shoe							
20 1 Plus 600'		Centralizer							
Roma HZ3		Baskets							
Mix Pomp 505160/		AFU Inserts							
DISD HZ0		Float Shoe							
3×3 P660 270'		Latch Down							
Pump HZo				SERVICE SON / EA					
miz : Pump 50 4 60/4		LM / 35							
DISP HRS		Pumptrk Charge PTA							
4th Phoho 60'	-	Mileage	70						
9				Tax	_				
				Discount					
X Signature				Total Charge					

