

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.

(Print Name) ☐ Employee 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.

Submitted Electronically

QUALITY WELL SERVICE, INC.

8251

Federal Tax I.D. # 481187368
Home Office 30060 N. Hwy 281, Pratt, KS 67124

Mailing Address P.O. Box 468

Todd's Cell 620-388-4967
Brady's Cell 620-727-6964

Office 620-786-6992
Fax 620-672-3663

Date	2-24-23	Sec.	4	Twp.	30	Range	8	County	Kingsman	State	KS	On Location	Finish
Lease	Meditor												
Well No.	3												
Location													

Owner	To Quality Well Service, Inc. You are hereby requested to rent cementing equipment and furnish cement and helper to assist owner or contractor to do work as listed.												
Contractor	Quality Well Service												
Type Job	PTA												
Hole Size	T.D.												
Csg.	5.5												
Tbg. Size	Depth												
Tool	Depth												
Cement Left in Csg.	Shoe Joint												
Meas Line	Displace												
Cement Amount Ordered 210.5 (Common)													
The above was done to satisfaction and supervision of owner agent or contractor.													
State													

EQUIPMENT		No.	Common	210
Pumptrk	No.			
Bulktrk	No.			
Bulktrk	No.			
Bulktrk	No.			
Pickup	No.			

JOB SERVICES & REMARKS

Rat Hole	
Mouse Hole	
Centralizers	
Baskets	
DV or Port Collar	
Sand	
Handling	212
Mileage	451.00
FLOAT EQUIPMENT	
Guide Shoe	
Centralizer	
Baskets	
AFU Inserts	
Float Shoe	
Latch Down	
Mileage	45
Pumptrk Charge	PTA
Mileage	40

Signature	
Total Charge	
Discount	
Tax	

Quality Well Service, Inc.

PO Box 468
Pratt, KS 67124

Invoice

Date	Invoice #
2/28/2023	2551

Bill To
Molitor Oil, Inc. 8426 W. Northridge Ct. Wichita, KS 67205

Good to pay

P.O. No.	Terms	Lease Name
		Molitor #3

Description	Qty	Rate	Amount
Rig Time	29	250.00	7,250.00T
Floor Rental	1	500.00	500.00T
Rip Casing	2	500.00	1,000.00T
Welding	3	75.00	225.00T
Water Truck	4	100.00	400.00T
Backhoe	12	110.00	1,320.00T
Phone Calls	1	20.00	20.00T
Clerical	1	40.00	40.00T
Wiping Rubber	1	20.00	20.00T
Molitor #3 Kingman Co.			
2/8/23: Drove to location, raised pole, changed over to pull rods, pulled rods, changed over for tubing, swedged in, drove home.			
2/9/23: Drove to location, unset packer, pulled tubing unitl wet, swabbed fluid down backside, pulled tubing out, broke tubing head off, swedged in, drove home.			
2/10/23: Drove to location, bailed 2 sacks cement on plug at 3965', set bridg eplug at 3880', bailed 2 sacks cement on plug, tore down rig.			
2/22/23: Drove to location, raised pole, dug cellar and pit, unpacked casing head, set floor, drove home.			
PLEASE REMIT TO ABOVE COMPANY & ADDRESS! Thank you for your business!			
Subtotal			
Sales Tax (8.0%)			
Total			

Quality Well Service, Inc.

PO Box 468
Pratt, KS 67124

Invoice

Date	Invoice #
2/28/2023	2551

Bill To
Molitor Oil, Inc. 8426 W. Northridge Ct. Wichita, KS 67205

P.O. No.	Terms	Lease Name
		Molitor #3

Description	Qty	Rate	Amount
2/23/23: Drove to location, unpacked casing head, pulled slips out, cut surface off 4' below ground, loaded hole with water, ripped casing at 2850', no gain, ripped casing at 2720', came free, pulled casing to 1350', swedged in, drove home.			
2/24/23: Drove to location, pumped 50 sacks cement, 3% cc at 1350', pulled casing to 800', pumped 35 sacks cement, pulled casing to 350', pumped 125 sacks cement to surface, pulled rest of casing, tore down floor and rig, emptied pit and back filled pit.			
PLEASE REMIT TO ABOVE COMPANY & ADDRESS! Thank you for your business!		Subtotal	\$10,775.00
		Sales Tax (8.0%)	\$862.00
		Total	\$11,637.00

Quality Well Service, Inc.

PO Box 468
Pratt, KS 67124

Invoice #	2/28/2023
Date	C-3174

Bill To	Mohitor Oil, Inc. 8426 W. Northridge Ct. Wichita, KS 67205
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P.O. No.	Terms	Lease Name
		Mohitor #3

Description		Qty	Rate	Amount
Common		210	16.75	3,517.50T
Calcium		100	1.20	120.00T
Plug/Pump Charge		1	1,100.00	1,100.00T
Handling		212	2.10	445.20T
.10 * sacks * miles		9,540	0.10	954.00T
Service Supervisor		1	350.00	350.00T
LMV		45	4.50	202.50T
Heavy Equipment Mileage		90	9.50	855.00T
Customer Discount			-1,508.84	-1,508.84
Discount Expires after 30 days from the date of the invoice			0.00	0.00
Mohitor #3				
Kingman Co.				

PLEASE REMIT TO ABOVE COMPANY & ADDRESS! Thank you for your business!

Subtotal	\$6,035.36
Sales Tax (8.0%)	\$482.83
Total	\$6,518.19