KOLAR Document ID: 1717053

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) Oil Well Gas Well OG D&A Cathodic Water Supply Well Other: SWD Permit #:					County: Well #:				
ENHR Permit #: Gas Storage Permit #:									
Is ACO-1 filed? Yes No If not, is well log attached? Yes No					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		Plugging Completed:					
Depth to	Top: Botto	m:T.D	'	. ragging	g completed.				
Show depth and thickness of a	all water, oil and gas forma	ations.							
Oil, Gas or Water		Casing Record (Surface, Conductor & Production)							
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 #:				9:					
Address 1:			Address 2:	:					
City:				State:		Zip:+			
Phone: ()									
Name of Party Responsible for	r Plugging Fees:								
State of	County, _			, ss.					
	<i>3</i> , –			_	implayed of Onesates	Operator on obeyed decertibed			
(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.

8269

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 1 4		((b)	1/71. (7.7							
Lease	Well No.	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Location	ion						
Contractor 10 4 10 / 1			Owner	Owner						
Type Job	To Quality W You are here	To Quality Well Service, Inc. You are hereby requested to rent cementing equipment and furnish								
Hole Size	T.D.	T.D.		cementer and helper to assist owner or contractor to do work as listed.						
Csg	Depth		Charge To	Charge To Valle Lating to the						
Tbg. Size	Depth		Street	Street						
Tool	Depth	Depth		City State						
Cement Left in Csg.	Shoe Joir	Shoe Joint		The above was done to satisfaction and supervision of owner agent or contractor.						
Meas Line	Displace	Displace		Cement Amount Ordered						
	IPMENT			CARTER CONTRACTOR						
Pumptrk	Pumptrk No.		Common	Common						
Bulktrk	ılktrk		Poz. Mix	Poz. Mix						
Buiktrk	No.		Gel.	Gel.						
Pickup No.			Calcium	Calcium						
JOB SERVIC	ES & REMAR	KS	Hulls	Hulls						
Rat Hole			Salt	Salt						
Mouse Hole			Flowseal	Flowseal						
Centralizers			Kol-Seal	Kol-Seal						
Baskets (1/4/2)	400		Mud CLR 48	Mud CLR 48						
D/V or Port Collar	CFL-117 or	CFL-117 or CD110 CAF 38								
			Sand	Sand						
	,		Handling	Handling						
	Mileage	Mileage								
		FLOAT EQUIPMENT								
Tak Marin 1962	Guide Shoe	Guide Shoe								
	Centralizer	Centralizer								
viav			Baskets	Baskets						
			AFU Inserts	AFU Inserts						
			Float Shoe	Float Shoe						
NATIONAL DESCRIPTION OF THE PROPERTY OF THE PR			Latch Down	Latch Down						
				AGEC AT YES						
			(3.43)							
			Pumptrk Cha	Pumptrk Charge						
	$(I_{i+1})^{\frac{1}{2}}\sqrt{\frac{1}{\chi_{i+1}}} = c_{i+1}$		Mileage							
with the	Joseph M. W.				Tax					
			Discount							
X Signature			Total Charge							