

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

Phone 785-483-1071

Home Office P.O. Box 32 Russell, KS 67665

No. 3413

Cell 785-324-1041

Date	Sec.	Twp.	Range	County	State	On Location	Finish
8-17-23	36	14	31W	Gove	KS		12:20pm

Location Oalley South to Jayhawk 3 east 1 1/2 South

Lease <u>T-Nelson</u>	Well No. <u>2-30</u>	Owner <u>M.E. Klein, Associates Inc.</u>
Contractor <u>Western</u>		To Quality Oilwell Cementing, Inc.
Type Job <u>PTA</u>		You are hereby requested to rent cementing equipment and furnish cementer and helper to assist owner or contractor to do work as listed.
Hole Size	T.D. <u>4450</u>	Charge To <u>ME Klein & Associates Inc</u>
Csg. <u>5 1/2</u>	Depth	Street
Tbg. Size <u>2 7/8</u>	Depth	City State
Tool	Depth	The above was done to satisfaction and supervision of owner agent or contractor.
Cement Left in Csg.	Shoe Joint	Cement Amount Ordered <u>455 60/40 4% 1,000lbs gel</u>

Meas Line	Displace	<u>500 hulls</u>
EQUIPMENT		
Pumptrk <u>16</u> No.	Cement Helper <u>Tim</u>	Common <u>235</u>
Bulktrk <u>19</u> No.	Driver <u>Doug</u>	Poz. Mix <u>155</u>
Bulktrk <u>PU</u> No.	Driver <u>Nick</u>	Gel. <u>24</u>
		Calcium

JOB SERVICES & REMARKS		Hulls <u>500# (10)</u>
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
<u>1st Plug 4450ft 1000lbs gel 100SKS</u>		Handling <u>455</u>
<u>300 hulls</u>		Mileage

FLOAT EQUIPMENT	
<u>2nd Plug 2,600ft 150SKS 200 hulls</u>	Guide Shoe
<u>3rd Plug 1,150ft circ. Cement 115SKS</u>	Centralizer
<u>4th Backside 10SKS</u>	Baskets
<u>5th top off well 15SKS topped off</u>	AFU Inserts
	Float Shoe
	Latch Down

<u>390SKS 1,000lbs gel 500 hulls</u>	Pumptrk Charge <u>plug</u>	Tax
	Mileage <u>26</u>	Discount
		Total Charge

X Signature [Signature]

Thanks