

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 WELL SERVICE, INC.

8417

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

Date	Sec.	Twp.	Range	County	State	On Location	Finish
10-18-23	20	33S	12W	Barber	Ks		
Lease <u>McCullough</u>	Well No. <u>1</u>	Location					
Contractor <u>CHA-CHE OILFIELD SERVICES</u>	Owner			To Quality Well Service, 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.						
Csg. <u>6"</u>	Depth			Charge To	<u>Gritfin</u>		
Tbg. Size <u>2 7/8</u>	Depth			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 <u>295 sc 60/40 4 1/2 GEL</u>			
EQUIPMENT				<u>100' hulls on site used 170sc</u>			
Pumptrk <u>3</u> No.				Common <u>102 sc</u>			
Bulktrk <u>15</u> No.				Poz. Mix <u>685c</u>			
Bulktrk No.				Gel. <u>585 lbs</u>			
Pickup No.				Calcium			
JOB SERVICES & REMARKS				<u>Hulls 700 hulls</u>			
Rat Hole				Salt			
Mouse Hole				Flowseal			
Centralizers <u>CEBID 4490</u>				Kol-Seal			
Baskets <u>PERF 1800-600</u>				Mud CLR 48			
D/V or Port Collar				CFL-117 or CD110 CAF 38			
<u>Hook up to csg ps. test 500' HELD B gals</u>				Sand			
<u>1st Plug 1800'</u>				Handling <u>300 (60)</u>			
<u>Mix Pump 35sc 60/40 4 1/2 GEL</u>				Mileage <u>45/12000</u>			
<u>Mix Pump 35sc 60/40 4 1/2 GEL 100' hulls</u>				FLOAT EQUIPMENT			
<u>DISO</u>				Guide Shoe			
<u>PTO H - PERF</u>				Centralizer			
<u>2nd Plug 1607'</u>				Baskets			
<u>Mix Pump 75sc 60/40 4 1/2 GEL</u>				AFU Inserts			
<u>check at 6" close valve</u>				Float Shoe			
<u>10 sc 60/40 4 1/2 GEL 500'</u>				Latch Down			
<u>PTO H</u>				<u>SERVICE SUPPLY EA</u>			
<u>TOP OFF 6" 16sc 60/40 4 1/2 GEL</u>				<u>IMV 45</u>			
				Pumptrk Charge <u>PTA</u>			
				Mileage <u>90</u>			
THANK YOU PLEASE CALL AGAIN TODD MATT ACTHUR Signature <u>[Signature]</u>				Tax			
				Discount			
				Total Charge			

Griffin Management LLC

McCullough OWWO 1

P&A

10/16/23

RU CCWS (Allen)

Pick up 58 jts 2 7/8" tubing and stood back in derrick. Shut down

10/18/23

RU Excel Wireline and set CIBP at 4490' and then placed 2 sks cement on top of CIBP

RU Quality and loaded hole. Pressure test to 500#. Held.

Excel shot 4 holes at 1810'

TIH with 57 jts 2 7/8" tubing. Quality spotted 70 sks cement at 1816'.

Pulled 9 stds in derrick. Laid down rest of tubing

Excel shot 4 holes at 600'

TIH with 9 stds and 1 single. Tubing at 607'

Quality pumped 85 sks cement from 607' to surface. Laid down 19 jts. Top of 6" with

cement. Broke out wellhead. RD. Move to GR
Smith