

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

Form CP-4
March 2009

Type or Print on this Form
Form must be Signed
All blanks must be Filled

WELL PLUGGING RECORD
K.A.R. 82-3-117

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.

PO Box 468
Pratt, KS 67124

Invoice

Date	Invoice #
2/8/2024	2623

Bill To
Vess Oil Corporation 1700 Waterfront PKWY BLDG. 500 Wichita, KS 67206-6619

P.O. No.	Terms	Lease Name
		Lentz A #1

Description	Qty	Rate	Amount
Rig Time	20	275.00	5,500.00T
Floor Rental	1	1,000.00	1,000.00T
Rip Casing	1	500.00	500.00T
Welding	2	75.00	150.00T
Water Truck	6	100.00	600.00T
Backhoe	8	110.00	880.00T
Phone Calls	1	30.00	30.00T
Clerical	1	50.00	50.00T
Wiping Rubber	1	20.00	20.00T
Fresh Water	2	30.00	60.00T
Lentz A #1 Sedgwick Co.			
2/2/24: Drove to location, rigged up, blew gas off well, dug out casing head, set floor, drove home.			
2/6/24: Drove to location, set bridg eplug at 3645', bailed 5 sacks cement, pulled slips, cut surface off 4' below ground, ,easured stretch, loaded hole with water, ripped casing at 3030', came free, changed over for casing, swedged in, drove home.			
2/7/24: Drove to location, pulled casing to 380', pumped 160 sacks cement to surface, pulled rest of casing, tore down floor and rig, dug out and burned lead lines, emptied and back filled pits.			

PLEASE REMIT TO ABOVE COMPANY & ADDRESS! Thank you for your business!	
Subtotal	\$8,790.00
Sales Tax (7.5%)	\$659.25
Total	\$9,449.25

Quality Well Service, Inc.

**PO Box 468
Pratt, KS 67124**

Invoice

Date	Invoice #
2/8/2024	C-3418

Bill To
Vess Oil Corporation 1700 Waterfront PKWY BLDG. 500 Wichita, KS 67206-6619

P.O. No.	Terms	Lease Name
		Lentz A #1

Description	Qty	Rate	Amount
Common	160	16.75	2,680.00T
Plug/Pump Charge	1	1,100.00	1,100.00T
Handling	200	2.10	420.00T
.10 * sacks * miles	10,000	0.10	1,000.00T
Service Supervisor	1	500.00	500.00T
LMV	50	4.50	225.00T
Heavy Equipment Mileage	100	9.50	950.00T
Customer Discount		-1,375.00	-1,375.00
Discount Expires after 30 days from the date of the invoice		0.00	0.00
Lentz A #1 Sedgwick Co.			

PLEASE REMIT TO ABOVE COMPANY & ADDRESS! Thank you for your business!	Subtotal	\$5,500.00
	Sales Tax (7.5%)	\$412.50
	Total	\$5,912.50

QUALITY WELL SERVICE, INC.

8494

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
2-7-24	20	27	04	Sedgwick	Ks		
Lease <i>Lentz A</i>	Well No. <i>1</i>	Location					
Contractor <i>Quality Well Service</i>				Owner			
Type Job <i>PTA</i>				To Quality Well Service, Inc. 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.		Charge To <i>Vess Oil</i>			
Csg. <i>5.5</i>		Depth		Street			
Tbg. Size		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 <i>200 sx Common</i>			
Meas Line		Displace					
EQUIPMENT				<i>Used 160'</i>			
Pumptrk <i>8</i>	No.			Common <i>160</i>			
Bulktrk <i>15</i>	No.			Poz. Mix			
Bulktrk	No.			Gel.			
Pickup	No.			Calcium			
JOB SERVICES & REMARKS				Hulls			
Rat Hole				Salt			
Mouse Hole				Flowseal			
Centralizers				Kol-Seal			
Baskets				Mud CLR 48			
D/V or Port Collar				CFL-117 or CD110 CAF 38			
<i>1st Pumped 160sx Common Cement @ 380' to surface.</i>				Sand			
				Handling <i>200 \$10,000</i>			
				Mileage <i>50</i>			
				FLOAT EQUIPMENT			
				Guide Shoe			
				Centralizer			
				Baskets			
				AFU Inserts			
				Float Shoe			
				Latch Down			
				<i>LMV 50</i>			
				<i>Service supervisor</i>			
				Pumptrk Charge <i>PTA</i>			
				Mileage <i>100</i>			
				Tax			
				Discount			
				Total Charge			
<i>Derek Hudson Hernan JTB</i>							
Signature							