

**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.

8565

Federal Tax I.D. # 481187368

Home Office 30060 N. Hwy 281, Pratt, KS 67124

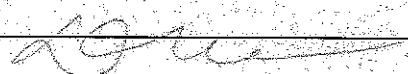
Mailing Address P.O. Box 468

Office 620-786-6992

Fax 620-672-3663

Todd's Cell 620-388-4967

Brady's Cell 620-727-6964

Date	6-6-24	Sec.	16	Twp.	33S	Range	32W	County	SEWARD	State	Ks	On Location		Finish		
Lease	SHIRLEY		Well No.	1		Location										
Contractor	JW ENERGY SERVICES							Owner								
Type Job	PTA							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	7 7/8		T.D.		Charge To OIL PRODUCERS INC OF KS											
Csg.	4 1/2		Depth		Street											
Tbg. Size	2 7/8		Depth		City											
Tool			Depth		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 230 x 60/40 4 1/2 gel											
<b>EQUIPMENT</b>										100' hulk on site						
Pumptrk.	3	No.			Common 138 x											
Bulktrk	12	No.			Poz. Mix 92 x											
Bulktrk		No.			Gel. 796 lbs											
Pickup		No.			Calcium											
<b>JOB SERVICES &amp; REMARKS</b>										Hulls 50 lbs						
Rat.Hole											Salt					
Mouse Hole	COBP d 5640 25x										Flowseal					
Centralizers	4340' 25x										Kol-Seal					
Baskets	Perfs 1610' - 525'										Mud CLR 48					
D/V or Port Collar											CFL-117 or CD110 CAF 38					
1st Plug 1610											Sand					
2nd Plug 1120											Handling 238					
M.K. Comp 25x 60/40 4 1/2 gel											Mileage 75 / 12000					
M.K. Comp 25x 60/40 4 1/2 gel 50' hulk											<b>FLOAT EQUIPMENT</b>					
1st Plug 525											Guide Shoe					
Run 1st hulk Pack OFF											Centralizer					
M.K. Comp 155 x 60/40 4 1/2 gel											Baskets					
rice cut 4 1/2 8 7/8											AFU Inserts					
Roll 1st											Float Shoe					
TOP OFF 25x 60/40 4 1/2 GEL											Latch Down					
										SERVICE SUPV IEA						
										LAW 75						
										Pumptrk Charge PTA						
										Mileage 150						
THANK YOU PLEASE CALL AGAIN DAN MATT ARTHUR																
Signature 																
										Tax						
										Discount						
										Total Charge						