

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.

PO Box 32 - 740 West Wichita Ave, Russell KS 67665
 Phone: 785-324-1041 fax: 785-483-1087
 Email: cementing@ruraltel.net

Date: 4/15/2024
 Invoice # 4062
 P.O.#:
 Due Date: 5/15/2024
 Division: Russell

Invoice

Contact:
 BACH OIL PRODUCTION
 Address/Job Location:

P.O. BOX 723
 ALMA NE 68870

PAIL

ENTERED

Reference:
 DELLANBACK 1

Description of Work:
 PLUG JOB

Services / Items Included:

Quantity	Price	Taxable	Item	Quantity	Price	Taxable
	\$ 900.03	Yes	Labor			
	\$ 2,566.03	Yes	Common-Class A			
123	\$ 585.09	Yes	Premium Gel (Bentonite)			
20	\$ 579.04	Yes	POZ Mix-Standard			
82	\$ 403.51	Yes	Bulk Truck M/W-Material Service Charge			
400	\$ 399.47	Yes	Pump Truck Mileage-Job to Nearest Camp			
88	\$ 339.95	Yes	Cottonseed Hulls			
10	\$ 310.70	Yes	Bulk Truck Mileage-Job to Nearest Bulk Plant			
88						

Invoice Terms:

Net 30

SubTotal: \$ 6,073.82
 Discount Available ONLY if Invoice is Paid & Received within listed terms of invoice: \$ (151.85)

SubTotal for Taxable Items:	\$ 5,921.97
SubTotal for Non-Taxable Items:	\$
Total:	\$ 5,921.97
Tax:	\$ 414.54
Amount Due:	\$ 6,336.51
Applied Payments:	
Balance Due:	\$ 6,336.51

7.00% Rooks County Sales Tax

Thank You For Your Business!

Past Due Invoices are subject to a service charge (annual rate of 24%)
 This does not include any applicable taxes unless it is listed.
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QUALITY OILWELL CEMENTING, INC.

Federal Tax I.D.# 20-2886107

Phone 785-483-1071
Cell 785-324-1041

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

No. 4062

Date <u>4-15-24</u>	Sec.	Twp.	Range	County <u>Rooks</u>	State <u>Ks</u>	On Location	Finish
Lease <u>Dellambach</u>				Well No. <u>1</u>	Owner		
Contractor <input checked="" type="checkbox"/>				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.		Charge To <u>BACH OIL</u>			
Csg. <u>52</u>		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 <u>400# 60/40 4%</u>			
Meas Line		Displace		<u>2600# Gel 500# Hulls</u>			
EQUIPMENT				Common			
Pumptrk <u>17</u>	No.	Cementer	<u>122</u>	Poz. Mix			
Bulktrk <u>22</u>	No.	Driver	<u>22</u>	Gel.			
Bulktrk <u>19</u>	No.	Driver	<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>2.5 sk Cement No Hulls</u>				Handling			
<u>2.5 sk of 200# Hulls</u>				Mileage			
<u>2600# Gel</u>				FLOAT EQUIPMENT			
<u>15.5 sk w/ 300# Hulls press 800#</u>				Guide Shoe			
<u>Used</u>				Centralizer			
<u>20.5 sk Cement</u>				Baskets			
<u>2600# Gel</u>				AFU Inserts			
<u>500# Hulls</u>				Float Shoe			
				Latch Down			
				Pumptrk Charge			
				Mileage			
				Tax			
				Discount			
				Total Charge			
X Signature <u>Aug 11/20</u>				<u>THANKS</u>			