

**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.

8604

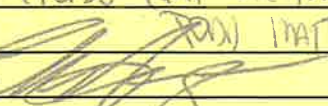
Federal Tax I.D. # 481187368

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	8-5-24	Sec.	B	Twp.	23S	Range	23W	County	FORO	State	KS	On Location	Finish	
Lease	Zimmerman	Well No.	1-3		Location									
Contractor	MENDEZ WELL SERVICE				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 Vincent O.L. Corp								
Csg.	4 1/2	Depth				Street								
Tbg. Size	2 3/8	Depth				City State								
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 160x 60/40 4 1/2 EL									
<b>EQUIPMENT</b>					600lbs gel on site used 130g									
Pumptrk	3	No.			Common 78x									
Bulktrk	15	No.			Poz. Mix 525x									
Bulktrk		No.			Gel. 1047 lbs									
Pickup		No.			Calcium									
<b>JOB SERVICES &amp; REMARKS</b>					Hulls									
Rat Hole					Salt									
Mouse Hole	CIBP 4905'				Flowseal									
Centralizers	cut off 2170'				Kol-Seal									
Baskets					Mud CLR 48									
D/V or Port Collar					CFL-117 or CD110 CAF 38									
1st Plug 1545'					Sand									
6x gel					Handling 191									
50x 60/40 4 1/2 gel					Mileage 65 / 10,000									
Diso					<b>FLOAT EQUIPMENT</b>									
2nd Plug 641'					Guide Shoe									
50x 60/40 4 1/2 gel					Centralizer									
Diso					Baskets									
					AFU Inserts									
3rd Plug 160'					Float Shoe									
30x 60/40 4 1/2 gel					Latch Down									
C/K CMT TO P/T					SEWICE Spx 1 EL LMV 65									
					Pumptrk Charge PTA									
					Mileage 130									
THANK YOU PLEASE CALL AGAIN TODD MATTHEW HANSON										Tax				
										Discount				
										Total Charge				
X Signature 														

# Quality Well Service, Inc.

**PO Box 468  
Pratt, KS 67124**

# Invoice

Date	Invoice #
8/6/2024	C-3538

<b>Bill To</b>
Vincent Oil Corporation 200 W. Douglas, Ste. 725 Wichita, KS 67202

<b>P.O. No.</b>	<b>Terms</b>	<b>Lease Name</b>
		Zimmerman #1-8

Description	Qty	Rate	Amount
Common	78	16.75	1,306.50T
Poz	52	9.50	494.00T
Gel	1,047	0.22	230.34T
Plug/Pump Charge	1	1,100.00	1,100.00T
Handling	171	2.10	359.10T
.10 * sacks * miles	10,000	0.10	1,000.00T
Service Supervisor	1	500.00	500.00T
LMV	65	4.50	292.50T
Heavy Equipment Mileage	130	9.50	1,235.00T
Customer Discount		-977.61	-977.61
Discount Expires after 30 days from the date of the invoice		0.00	0.00
Zimmerman #1-8 Ford Co.			

PLEASE REMIT TO ABOVE COMPANY & ADDRESS! Thank you for your business!	<b>Subtotal</b>	\$5,539.83
	<b>Sales Tax (7.5%)</b>	\$415.49
	<b>Total</b>	\$5,955.32