

**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**

PLUGGING

# QUALITY WELL SERVICE, INC.

8608

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	8-14-24	Sec.	32	Twp.	29S	Range	24W	County	FOLD	State	Ks	On Location	Finish	
Lease	Martam	Well No.	1-32	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	4 1/2	T.D.							Charge To					
Csg.		Depth							Violent Oil Corp					
Tbg. Size	2 3/8	Depth							Street					
Tool		Depth							City					
Cement Left in Csg.		Shoe Joint							State					
Meas Line		Displace							The above was done to satisfaction and supervision of owner agent or contractor.					
							Cement Amount Ordered							
							140 sk 60/40 4 1/2 GEL							
							600' GEL							
<b>EQUIPMENT</b>														
Pumptrk	3	No.		Common										
Bulktrk	15	No.		84 SK										
Bulktrk		No.		Poz. Mix										
Pickup		No.		56 SK										
							Gel. 1082 lbs							
							Calcium							
<b>JOB SERVICES &amp; REMARKS</b>							<b>FLOAT EQUIPMENT</b>							
Rat Hole							Hulls							
Mouse Hole							Salt							
Centralizers							Flowseal							
Baskets							Kol-Seal							
D/V or Port Collar							Mud CLR 48							
1st Plug 1563'							CFL-117 or CD110 CAF 38							
600' GEL							Sand							
50 sk 60/40 4 1/2 GEL							Handling 151							
Disp							Mileage 65/9315							
2nd Plug 691'														
50 sk 60/40 4 1/2 GEL							Guide Shoe							
Disp							Centralizer							
3rd Plug 60'							Baskets							
40 sk 60/40 4 1/2 GEL							AFU Inserts							
CIRC CNT TO FIT							Float Shoe							
PROOH							Latch Down							
							SERVICE SUP 1 EA							
							LNU 65							
THANK YOU							Pumptrk Charge PTA							
							Mileage 130							
							Tax							
							Discount							
							Total Charge							
Signature														

**Quality Well Service, Inc.**

**PO Box 468  
Pratt, KS 67124**

**Invoice**

Date	Invoice #
8/15/2024	C-3544

Bill To
Vincent Oil Corporation 200 W. Douglas, Ste. 725 Wichita, KS 67202

P.O. No.	Terms	Lease Name
		Marfam #1-32

Description	Qty	Rate	Amount
Common	84	16.75	1,407.00T
Poz	56	9.50	532.00T
Gel	1,082	0.22	238.04T
Plug/Pump Charge	1	1,100.00	1,100.00T
Handling	151	2.10	317.10T
.10 * sacks * miles	9,815	0.10	981.50T
Service Supervisor	1	500.00	500.00T
LMV	65	4.50	292.50T
Heavy Equipment Mileage	130	9.50	1,235.00T
Customer Discount		-990.47	-990.47
Discount Expires after 30 days from the date of the invoice		0.00	0.00
Marfam #1-32 Ford Co.			
PLEASE REMIT TO ABOVE COMPANY & ADDRESS! Thank you for your business!			

<b>Subtotal</b>	\$5,612.67
<b>Sales Tax (7.5%)</b>	\$420.95
<b>Total</b>	\$6,033.62