

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.

(Print Name) ☐ Employee of Operator or ☐ Operator on above-described well,

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.

Federal Tax I.D.# 20-2886107

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

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

No. 4222

Date <u>10-11-24</u>	Sec.	Twp.	Range	County <u>BARTON</u>	State <u>KS</u>	On Location	Finish
				Location <u>SUZANNE 25 1 1/2 E</u>			
Lease <u>Seafert</u>	Well No. <u>4</u>			Owner			
Contractor <u>Cyclone</u>				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 <u>7 7/8</u>	T.D.			Charge To <u>TEMP OIL & GAS</u>			
Csg. <u>5 1/2</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			
Meas Line	Displace						
EQUIPMENT				Common <u>165</u>			
Pumptrk <u>18</u> No.	Cementer	<u>Bill</u>		Poz. Mix <u>110</u>			
Bulktrk No.	Helper	<u>Bryant</u>		Gel. <u>10</u>			
Bulktrk <u>21</u> No.	Driver	<u>Doog</u>		Calcium			
JOB SERVICES & REMARKS				Hulls <u>400 # (E)</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>1.500 - 125# 200# Hulls</u>				Handling <u>400</u>			
<u>840 - 50# 200# Hulls</u>				Mileage			
<u>350 - circ w/ 100#</u>				FLOAT EQUIPMENT			
				Guide Shoe			
				Centralizer			
				Baskets			
				AFU Inserts			
				Float Shoe			
				Latch Down			
				Pumptrk Charge <u>Plug</u>			
				Mileage <u>25</u>			
<u>Used</u>				Tax			
<u>400# Hulls</u>				Discount			
<u>275# Cement</u>				Total Charge			
<u>Terry Barry</u>				Thanks <u>Terry</u>			

X
Signature

say-fert 4#

Both.
plug

THANK YOU FOR SHOPPING AT
JANTZ LUMBER
(620) 241-4044

10/09/24 2:16PM DSB 551 SALE

PC 5 BG \$24.99 BG
PORTLAND CEMENT 94# BAG \$124.95
TYPE 1 STANDARD
395528 2 EA \$5.99 EA S
1"X25' YEL TAPE RULE \$11.98

SUB-TOTAL: \$ 136.93 TAX: \$ 12.32
TOTAL: \$ 149.25
BC AMT: \$ 149.25

BK CARD#: XXXXXXXXXXXX4245
MID:*****7960TID:
AUTH: 08006G AMT: \$ 149.25
Host reference #:682080 Bat#0000

TID: 00340071

Chip Read
CARD TYPE: VISA EXPR: XXXX
AID : A0000000031010
TVR : 0080008000
IAD : 06021203LOA002
TSI : E800
ARC : 00
MODE : Issuer
CVM :
Name : CHASE VISA
ATC : 0024
AC : 5177B1879836C74F
TxnID/ValCode: 088823

cont.
+31.50

Bank card USD\$ 149.25



==> JRNL#G82080 <==
CUST NO:*5

THANK YOU CLAY LACY
FOR YOUR PATRONAGE

[Signature]

Name : X
I agree to pay above total amount
according to card issuer agreement
(merchant agreement if credit voucher)
Acct: CASH CUSTOMER

Customer Copy

NO RETURNS ON DISCONTINUED ITEMS