

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. 4314

Date 12-23-24	Sec.	Twp.	Range	County Graham	State KS	On Location	Finish
Lease <u>Goosland</u>				Location <u>Bogue 353W</u>			
Contractor <u>Chito's</u>				Owner To Quality Oilwell Cementing, Inc. You are hereby requested to rent cementing equipment and furnish cementer and helper to assist owner or contractor to do work as listed.			
Type Job <u>PTA</u>				Charge To <u>H&C</u>			
Hole Size				T.D.			
Csg. <u>5 1/2</u>				Depth			
Tbg. Size <u>2 3/8</u>				Depth			
Tool				Depth			
Cement Left in Csg.				Shoe Joint			
Meas Line				Displace			
EQUIPMENT				Common <u>190</u>			
				Poz. Mix <u>125</u>			
Pumptrk <u>18</u>	No.	Cementer	Driver <u>Bill</u>				
Bulktrk	No.	Driver	Driver <u>Bryant</u>				
Bulktrk <u>21</u>	No.	Driver	Driver <u>Joe</u>				
JOB SERVICES & REMARKS				Hulls <u>400 # (8)</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>3660 - 50# Cement 1000 # Gel</u>				Handling <u>400</u>			
<u>50# Cement w/ 200 # Hulls</u>				Mileage			
<u>1735 - Circ w/ 180 #</u>				FLOAT EQUIPMENT			
				Guide Shoe			
				Centralizer			
				Baskets			
<u>Top of 304</u>				AFU Inserts			
<u>Backside 304 300 #</u>				Float Shoe			
				Latch Down			
<u>Used</u>							
<u>1000 # Gel</u>				Pumptrk Charge <u>Plug</u>			
<u>400 # Hull</u>				Mileage <u>50</u>			
<u>315# Cement</u>							
Signature <u>Bob Plant</u>				Thanks			
				Tax			
				Discount			
				Total Charge			

**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: 12/23/2024
Invoice # 4314

P.O.#:

Due Date: 1/22/2025

Division: Russell

Invoice

Contact:

H & C Oil Operations

Address/Job Location:

P.O. Box 86

Plainville Ks 67663

Reference:

GOOSLAND 25-1

Description of Work:

PLUG JOB

Services / Items Included:	Quantity	Price	Taxable	Item	Quantity	Price	Taxable
Labor		\$ 900.03	Yes				
Common-Class A	190	\$ 3,948.33	Yes				
Premium Gel (Bentonite)	21	\$ 614.34	Yes				
Bulk Truck Matl-Material Service Charge	400	\$ 403.51	Yes				
Cottonseed Hulls	8	\$ 271.96	Yes				
Pump Truck Mileage-Job to Nearest Camp	50	\$ 226.97	Yes				
Bulk Truck Mileage-Job to Nearest Bulk Plant	50	\$ 176.54	Yes				
POZ Mix-Standard	21	\$ 148.29	Yes				

Invoice Terms:

Net 30

SubTotal: \$ 6,689.97

Discount Available ONLY if Invoice is Paid & Received
within listed terms of invoice: \$ (167.25)

SubTotal for Taxable Items: \$ 6,522.72

SubTotal for Non-Taxable Items: \$ -

Total: \$ 6,522.72

Tax: \$ 489.20

7.50% Graham County Sales Tax

Amount Due: \$ 7,011.92

Applied Payments:

Balance Due: \$ 7,011.92

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.

©2008-2013 Straker Investments, LLC. All rights reserved.