

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.

8769

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	7-28-25	Sec.	14	Twp.	31S	Range	39W	County	STEVENS	State	KI	On Location		Finish		
Lease	DILL MOUND		Well No.		H-1		Location									
Contractor	J.V. Edwards - BOBROS INC							Owner								
Type Job	PTH							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.													
Csg.	5 1/2		Depth		Charge To J.V. Edwards Inc of KI											
Tbg. Size	2 7/8		Depth		Street											
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 170 2 1/2 1/2 47 Gel											
EQUIPMENT													VAL 130			
Pumptrk	3	No.						Common	108 SL							
Bulktrk	12	No.						Poz. Mix	72 =							
Bulktrk		No.						Gel.	619 lbs							
Pickup		No.						Calcium								
JOB SERVICES & REMARKS													Hulls			
Rat Hole													Salt			
Mouse Hole	STOP 5450 03												Flowseal			
Centralizers	CEM 1730'												Kol-Seal			
Baskets	221												Mud CLR 48			
D/V or Port Collar													CFL-117 or CD110 CAF 38			
Hook up to Well													Sand			
Pump 03 BBL LOADED on 300'													Handling 170			
STOP 1700													Mileage 10/11,400			
STOP 1700													FLOAT EQUIPMENT			
STOP 1700													Guide Shoe			
STOP 1700													Centralizer			
STOP 1700													Baskets			
STOP 1700													AFU Inserts			
STOP 1700													Float Shoe			
STOP 1700													Latch Down			
STOP 1700													SERVING SW JE			
STOP 1700													Pumptrk Charge 17			
STOP 1700													Mileage 10			
STOP 1700													Tax			
STOP 1700													Discount			
STOP 1700													Total Charge			
STOP 1700													Signature			

Hole Size 7/8 T.D.
 Csg 5/8 Depth
 Tbg Size 2 3/8 Depth
 Tool Depth
 Cement Left in Csg. Shoe Joint
 Meas Line Displace

Charge To OIL PRODUCES INC OF KS
 Street
 City State
 The above was done to satisfaction and supervision of owner agent or contractor.
 Cement Amount Ordered 190 2 60/40 4/1 GEL

EQUIPMENT

Pumptrk	3	No.	
Bulktrk	12	No.	
Bulktrk		No.	
Pickup		No.	

USED 120 SC
 Common 108 SC
 Poz. Mix 72 SC
 Gel. 619 lbs
 Calcium
 Halls
 Salt

JOB SERVICES & REMARKS

Rat Hole
 Mouse Hole CTBP @ 5430' 254
 Centralizers CTBP @ 1730'
 Baskets PERF
 D/V or Port Collar

Flowseal
 Kol-Seal
 Mud CLR 48
 CFL-117 or CD110 CAF 38
 Sand
 Handling 190
 Mileage 60/11,400

Hook up to WELL
 Pump 63 Bbl LOADED psi up 300'
 RTIH +b6 1700
 Pump H2O Est Ciel
 mix: Pump 30 SC 60/40 4/1 GEL
 Disp
 PFOOT PERF @ 650'
 RTIH +b6 @ 620'
 MIX: Pump 80 SC close 5/2
 MIX: Pump 55 SC Ciel CMT TO PT
 PFOOT
 TOP OFF 5/2 15 SC

FLOAT EQUIPMENT

Guide Shoe
 Centralizer
 Baskets
 AFU Inserts
 Float Shoe
 Latch Down

THANK YOU
 PLEASE CALL AGAIN
 TODD BEARD MARY
 ALICE JACKSON

SERVICE SUP 1 EA
 LNW 60
 Pumptrk Charge PTA
 Mileage 120

X
 Signature

Tax
 Discount
 Total Charge