

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 OILWELL CEMENTING, INC.**

PO Box 32 - 740 West Wichita Ave, Russell KS 67665
Phone:785-324-1071 Fax:785-483-1087
Email: cementing@ruraltel.net

Date: 10/1/2025
Invoice # 4659

P.O.#:

Due Date: 10/30/2025
Division: *Russell*

Invoice

Contact:
Mai Oil Operations
Address/Job Location:

8111 Douglas Ave., Ste 710
Dallas TX 75225-5520

Reference:
D & D UNIT 1

Description of Work:
PLUG JOB

Services / Items Included:	Quantity	Price	Taxable	Item	Quantity	Price	Taxable
Labor		\$ 570.19	Yes				
Common-Class A	135	\$ 2,907.41	Yes				
POZ Mix-Standard	90	\$ 658.64	Yes				
Bulk Truck Mat-Material Service Charge	300	\$ 313.84	Yes				
Premium Gel (Bentonite)	8	\$ 242.55	Yes				
Cottonseed Hulls	4	\$ 140.93	Yes				
Bulk Truck Mileage-Job to Nearest Bulk Plant	32	\$ 117.09	Yes				

Invoice Terms:

Net 30

	SubTotal:	\$	4,950.44
	Discount Available <i>ONLY</i> if Invoice is Paid & Received within listed terms of invoice:	\$	(123.76)
	SubTotal for Taxable Items:	\$	4,826.68
	SubTotal for Non-Taxable Items:	\$	-
	Total:	\$	4,826.68
	Tax:	\$	313.73
	Amount Due:	\$	5,140.41
	Applied Payments:		
	Balance Due:	\$	5,140.41

6.50% Ness County Sales Tax

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.
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QUALITY OILWELL CEMENTING, INC.

Federal Tax I.D.# 20-2886107

Phone 785-483-1071

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

No. 4659

Cell 785-324-1041

Date	Sec.	Twp.	Range	County	State	On Location	Finish
10-1-25				Butler	KS		
Lease <i>D&D unit</i>				Location <i>Boone, 65, SW 1/4, E into</i>			
Well No. <i>1</i>				Owner			
Contractor <i>Express well service</i>				To Quality Oilwell Cementing, Inc.			
Type Job <i>PTA</i>				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				Charge To <i>MAI oil</i>			
Csg. <i>5 1/2</i>				T.D.			
Tbg. Size <i>2 7/8</i>				Depth <i>430</i>			
Tool				Street			
Cement Left in Csg.				City			
Meas Line				State			
Displace				The above was done to satisfaction and supervision of owner agent or contractor.			
EQUIPMENT				Cement Amount Ordered <i>300⁶⁰ / 40 4%</i>			
Pumptrk No. <i>15</i>				200# Hulls			
Bulktrk No. <i>21</i>				Common <i>135</i>			
Bulktrk No. <i>21</i>				Poz. Mix <i>90</i>			
Bulktrk No. <i>21</i>				Gel. <i>8</i>			
Bulktrk No. <i>21</i>				Calcium			
JOB SERVICES & REMARKS				Hulls <i>200# (4)</i>			
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			
<i>1st plug at 1380 - 50sk & 200# Hulls</i>				Handling <i>300</i>			
<i>2nd plug at 1400 - circulated cement 140 sk</i>				Mileage			
<i>35-5sk</i>				FLOAT EQUIPMENT			
<i>Topoff 30sk</i>				Guide Shoe			
				Centralizer			
				Baskets			
				AFU Inserts			
				Float Shoe			
				Latch Down			
				Pumptrk Charge <i>plug</i>			
				Mileage <i>32</i>			
				Tax			
				Discount			
				Total Charge			
Signature				<i>Thanks</i>			