

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: 9/21/2025
 Invoice # 4581

P.O.#:

Due Date: 10/21/2025
 Division: Russell

Invoice

Contact:
 Mai Oil Operations
 Address/Job Location:

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

Reference:
 HORACEK 2 SEC 19-16-25

Description of Work:
 PLUG JOB

Services / Items Included:

	Quantity	Price	Taxable	Item	Quantity	Price	Taxable
Labor		\$ 932.75	Yes				
Common-Class A	175	\$ 3,768.86	Yes				
PCZ Mix-Standard	115	\$ 841.59	Yes				
Bulk Truck Mat-Material Service Charge	300	\$ 313.64	Yes				
Premium Gel (Bentonite)	10	\$ 303.18	Yes				
Flo Seal	75	\$ 156.82	Yes				
Pump Truck Mileage-Job to Nearest Camp	27	\$ 127.02	Yes				
Bulk Truck Mileage-Job to Nearest Bulk Plant	27	\$ 96.80	Yes				
Dry Hole Plug	1	\$ 87.82	Yes				

Invoice Terms:

Net 30

SubTotal: \$ 6,630.48

Discount Available ONLY if Invoice is Paid & Received within listed terms of invoice: \$ (165.76)

SubTotal for Taxable Items: \$ 6,464.72

SubTotal for Non-Taxable Items: \$ -

Total: \$ 6,464.72

Tax: \$ 420.21

6.50% Ness County Sales Tax

Amount Due: \$ 6,884.93

Applied Payments:

Balance Due: \$ 6,884.93

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. 4581

Cell 785-324-1041

Date	9-21-25	Sec.	19	Twp.	16	Range	25	County	Ness	State	KS	On Location		Finish	
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Location **UTICG 2E 1/4 N**

Lease **HORACEK** Well No. **2** Owner

Contractor **Southwind** 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 **PTA**

Hole Size **7 3/8** T.D. **4557** Charge To **M A I O I L**

Csg. 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 **290 lbs 6440-4**

Meas Line Displace **1/4" Flo seal**

EQUIPMENT

Pumptrk **17** No. Cementer **Bill** Common **175**

Bulktrk No. Helper **BRYANT** Poz. Mix **185**

Bulktrk No. Driver **JUSTIN** Gel. **10**

Bulktrk No. Driver Calcium

JOB SERVICES & REMARKS

Remarks: Hulls

Rat Hole Salt

Mouse Hole Flowseal **75#**

Centralizers Kol-Seal

Baskets Mud CLR 48

D/V or Port Collar CFL-117 or CD110 CAF 38

2030 - 50 lbs Handling **300**

1260 - 80 lbs Mileage

600 - 40 lbs

320 - 50 lbs

60 - 20 lbs

RH - 30 lbs

MH - 20 lbs

FLOAT EQUIPMENT

Guide Shoe

Centralizer

Baskets

AFU Inserts

Float Shoe

Latch Down

WOODPLUG - 1

Pumptrk Charge **plug**

Mileage **27**

Thanks

Signature *[Signature]*

Tax

Discount

Total Charge