

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



Service Order No.

6630

457 Yucca Lane • Pratt, Kansas 67124 • 620-388-5676

Date 1-16-26

Company Oil Producers			Client Order# 06		
Billing Address		City	State		Zip
Lease & Well # Hart A #1		Field Name		Legal Description (coordinates)	
County Stafford	State Ks.		Casing Size 4 1/2		Casing Weight
Fluid Level (surface)		Reading from		Customer T.D.	Excel Wireline T.D.
Engineer K. Schmiedler	Operator N Schmiedler		Operator		Unit# 02

Product Code	Description	Qty	Unit Price	Depth		\$ Amount
				From	To	
1-15-21	Service Charge					N/C
1-16-26	Service Charge					950 ⁰⁰
	Set 4 1/2 B.P. @ 4200			0	4200	2550 ⁰⁰
	Dump bail 25x cnt	20		0	4200	840 ⁰⁰
	Set 4 1/2 B.P. @ 3885	min		0	3885	2200 ⁰⁰
	Dump bail 25x cnt	20		0	3885	777 ⁰⁰
	Set 4 1/2 B.P. @ 970	min		0	970	2200 ⁰⁰
	Sonic Cement Bond Log	min		0	970	11050 ⁰⁰
	Set 4 1/2 Cement Retainer @ 380					2500 ⁰⁰

Received the above service according to the terms and conditions specified below, which we have read and to which we hereby agree.

Customer _____

General Terms and Conditions

- (1) All accounts are to be paid within the terms fixed by Excel Wireline invoices and should these terms not be observed, interest at the rate of 1.5% per month will be charged from the date of such invoice. Interest, Attorney, Court, Filing and other fees will be added to accounts turned over to collections.
- (2) Because of the uncertain conditions existing in a well which are beyond the control of Excel Wireline, it is understood by the customer that Excel Wireline cannot guarantee the results of their services and will not be held responsible for personal or property damage in the performance of their services.
- (3) Should any of Excel Wireline instruments be lost or damaged in the performance of the operations requested, the customer agrees to make every reasonable effort to recover same, and to reimburse Excel Wireline for the value of the items which cannot be recovered or for the cost of repairing damage to items recovered.
- (4) It is further understood and agreed that all depth measurements shall be supervised by the customer or its employees, and customer hereby certifies that the zones, as shot, were approved.
- (5) The customer certifies that it has the full right and authority to order such work on such well, and that the well in which the work to be done by Excel Wireline is in proper and suitable condition for the performance of said work.
- (6) No employee is authorized to alter the terms or conditions of this agreement.

SUBTOTAL

13,667⁰⁰

DISCOUNT

-1217.00

SUBTOTAL

8450⁰⁰

TAX

669.75

NET TOTAL

\$ 9119.75

QUALITY WELL SERVICE, INC.

8825

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	1-16-26	Sec.	15	Twp.	25S	Range	15W	County	STAFFORD	State	Ks	On Location	Finish
Lease	HAZT		Well No.		A-1		Location						
Contractor	Mohegan Well Service							Owner					
Type Job	ETA							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.	4 1/2		Depth		Charge To OIL PRODUCERS INC OF KS								
Tbg. Size	2 3/8		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 175 & Com 3 1/2 CC 12 1/2								
EQUIPMENT								100 # hulls on site USED 95#					
Pumptrk	3	No.					Common 95#						
Bulktrk	15	No.					Poz. Mix						
Bulktrk		No.					Gel.						
Pickup		No.					Calcium 260"						
JOB SERVICES & REMARKS								Hulls 100"					
Rat Hole								Salt					
Mouse Hole								Flowseal					
Centralizers								CIBP @ 970'					
Baskets								Kol-Seal					
D/V or Port Collar								Mud CLR 48					
15" Pbg @ 750'								CFL-117 or CD110 CAF 38					
Pump H2								Sand					
mix Pump 25 & 3 1/2 CC								Handling 181					
mix Pump 25 & 3 1/2 CC w 100" hulls								Mileage 25 / 4525					
								FLOAT EQUIPMENT					
Disp								Guide Shoe					
PTDHA WOL								Centralizer					
TAG CMT @ 350'								Baskets					
Tbg @ 300								AFU Inserts					
mix Pump 30 & 3 1/2 CC								Float Shoe					
Circ out 4 1/2 close Unlue on 4 1/2								Latch Down					
Pbg 500"								LMT NO CHARGE NO PD on Loc					
P-11 Tool								SERVICE Sup 1 Ea					
Hook up to 8 1/2								Pumptrk Charge PTA					
mix Pump 15 & 3 1/2 CC Pbg up 400"								Mileage 50					
TANK 400													
PLEASE CALL AGAIN TODAY													
Signature								Tax					
								Discount					
								Total Charge					