This form shall be filed with the Kansas Corpora Derby Building, Wichita, Kansas 67202, within ni completion of a well, regardless of how the well	nety (90) days after the was completed.
FOR INFORMATION REGARDING THE NUMBER OF COPIES TO REQUIRING COPIES OF ACO-1 FORMS SEE PAGE TWO (2) F Letter requesting confidentiality attached.	, SIDE TWO (2) OF THIS FORM.
C Attach ONE COPY of EACH wireline log run (i gamma ray neutron log etc.)***Check here if NO log	e. electrical log, sonic log, TA ROUGHTA BRANCE E, INDICATE. IF INFORMATION CHECK
PLEASE FILL IN ALL INFORMATION. IF NOT AVAILABLE LATER BECOMES AVAILABLE, SUBMIT BY LETTER.	e, indicate. If information Recording
LICENSE # 8161 EXPIRATION DAT	E 8406
OPERATOR William H. Reeder	1112 110.
ADDRESS P.O. Box 347	COUNTY Montgomery
Independence, KS	FIELD Havana
** CONTACT PERSON William H. Reeder PHONE 316-331-4500	PROD. FORMATION Redd Indicate if new pay.
PURCHASER Koch Oil	LEASE Brady
ADDRESS Wichita, KS	WELL NO
	WELL LOCATION
DRILLING M & M Contracting	800 Ft. from SN Line and
CONTRACTOR	600 Ft. from WF Line of
	theSE (Qtr.)SEC 2 TWP 34 RGE 13 X
Tyro, KS	
PLUGGING CONTRACTOR	WELL PLAT (Office Use Onl
ADDRESS	_ KCC
	KGS
TOTAL DEPTH 562 PBTD 560	SWD/REP_
SPUD DATE 7/3/83 DATE COMPLETED 7/20/83	PLG
ELEV: GR 768 DF KB	NGPA
DRILLED WITH (CABLE) (ROTARY) (AIR) TOOLS.	
DOCKET NO. OF DISPOSAL OR REPRESSURING WELL BEING USED TO DISPOSE OF WATER FROM THIS LEASE CD 78124	(C-20, 223)
Amount of surface pipe set and cemented 22 1/2'	DV Tool Used? NO
TYPE OF COMPLETION THIS AFFIDAVIT APPLIES TO: (Circ. Dry, Disposal, Injection, Temporarily Abandoned. completion Other completion	le ONE) - Oil Shut-in Gas, Gas, If OWWO, indicate type of re-
ALL REQUIREMENTS OF THE STATUTES, RULES AND REGULATION CAS INDUSTRY HAVE BEEN FILLY CONTINUED.	- /
AND GAS INDUSTRY HAVE BEEN FULLY COMPLIED WITH.	TO REGULATE THE OIL
A P P T D A U T M	
AFFIDAVIT William H. Reeder	
that:	eing of lawful age, hereby certifies
I am the Affiant, and I am familiar with the contained therein are	ntents of the foregoing Affidavit.
	Will - W.D.
	(Name)
SUBSCRIBED AND SWORN TO BEFORE ME this	_day of _Oclobur ,
19 <u>83</u> .	
	Pluging Silne
RYA).	- Killy
VIRGINIA C. KELLY My Appt. Exp.	(NOTARY PUBLIC)
MY COMMISSION EXPIRE My Appt. Exp	(NOTARY PUBLIC)

SIDE ONE

N/A

P&XXXXXXXXX