

STATE OF KANSAS  
COMMISSION  
S. Market, Room 2078  
Wichita, KS 67202

WELL PLUGGING RECORD  
K.A.R.-82-3-117

API NUMBER Comp. 11-13-60

15-079-00384-00-00

LEASE NAME Warkentine "A"

RECEIVED

TYPE OR PRINT

WELL NUMBER 1

NOV 13 2003

NOTICE: Fill out completely  
and return to Cons. Div.  
office within 30 days.

330 Ft. from S Section Line

4950 Ft. from <sup>W</sup>E Section Line

KCC WICHITA

LEASE OPERATOR HAROLD J. MILBURN

SEC. 9 TWP. 23 RGE. 3W (E) or (W)

ADDRESS 1315 N. Monroe Hutchinson, Kansas 67502

COUNTY Harvey

PHONE (620) 663-1616 OPERATOR'S LICENSE NO. 5526

Date Well Completed 12-28-1960

Character of Well Gas

Plugging Commenced 10-27-03

(Oil, Gas, D&A, SWD, Input, Water Supply Well)

Plugging Completed 10-30-03

A plugging proposal was approved on \_\_\_\_\_ (date)

Mike Wilson (KCC District Agent's Name).

ACO-1 filed? \_\_\_\_\_ If not, is well log attached? \_\_\_\_\_

Producing Formation \_\_\_\_\_ Depth to Top \_\_\_\_\_ Bottom \_\_\_\_\_ T.D. 3330'

Show depth and thickness of all water, oil and gas formations.

WELL, GAS OR WATER RECORDS

CASING RECORD

Formation	Content	From	To	Size	Put in	Pulled out
<u>Sand</u>			<u>365</u>	<u>8-5/8"</u>	<u>365'</u>	<u>None</u>
<u>Sub</u>			<u>3329</u>	<u>4-1/2"</u>	<u>3329'</u>	<u>1660'</u>

Describe in detail the manner in which the well was 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 are used, state the character of same and depth placed, from \_\_\_\_\_ feet to \_\_\_\_\_ feet each.

Plugged off bottom with sand to 3200' and 4 sacks cement. Cut pipe loose @1660', pulled up to 615'; pumped 35 sacks cement, pulled up to 399' and circulated cement to surface. 60/40 pos. 4% gel.

Plugging Complete.

Name of Plugging Contractor Mike's Testing & Salvage, Inc. License No. 31529

Address P.O. Box 467 Chase, Kansas 67524

Name of Party Responsible for Plugging Fees: Mike's Testing & Salvage, Inc. Milburn, Harold

State of Kansas County of Rice, ss.

Mike Kelso (Employee of Operator) or (Operator)

above-described well, being first duly sworn on oath, says: That I have knowledge of the facts and statements, and matters herein contained and the log of the above-described well as filed to the same are true and correct, so help me God.

(Signature) Mike Kelso

(Address) P. O. Box 467 Chase, KS 67524

SUBSCRIBED AND SWORN TO before me this 11th day of November, 2003

Irene Herzberg  
Notary Public

My Commission Expires:

