

STATE OF KANSAS  
STATE CORPORATION COMMISSION  
200 Colorado Derby Building  
Wichita, Kansas 67202

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

API NUMBER 15-147-20092-001

LEASE NAME Wittfoth

WELL NUMBER 1

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

1320 Ft. from S Section Line

4620 Ft. from E Section Line

SEC. 10 TWP. 1 RGE. 18 (E) or (W)

COUNTY Phillips

Date Well Completed 5-13-70

Plugging Commenced 7-19-95

Plugging Completed 7-19-95

LEASE OPERATOR Baird Oil Co. Inc.

ADDRESS Box 428 Logan, KS 67646

PHONE# (913) 689-7456 OPERATORS LICENSE NO. 5352

Character of Well oil

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

The plugging proposal was approved on 6-21-95 (date)

by Carl Goodrow (KCC District Agent's Name).

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

Producing Formation KC Depth to Top 3369 Bottom 3489 T.D. 3542

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

OIL, GAS OR WATER RECORDS | CASING RECORD

Formation	Content	From	To	Size	Put in	Pulled out
<u>KC</u>	<u>oil and wtr</u>	<u>3369</u>	<u>3489</u>	<u>5 1/2</u>	<u>3574</u>	<u>None</u>
		<u>surface</u>	<u>201</u>	<u>8 3/8</u>	<u>201</u>	<u>None</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 were used, state the character of same and depth placed, from    feet to    feet each set.

Perforated casing at 1725 and 1175. Then pumped 250 sx of 60/40 Permox cement down the 5 1/2 casing along with 450# of Halls. max pressure 200#. Shut-in at 100#. Pumped 50 sx of cement down the backside with 50# of Halls at 300# Max. Pressure Shut-in pressure 100#.

(If additional description is necessary, use BACK of this form.)

Name of Plugging Contractor Allied License No. \_\_\_\_\_

Address Russell, KS

NAME OF PARTY RESPONSIBLE FOR PLUGGING FEES: \_\_\_\_\_

STATE OF \_\_\_\_\_ COUNTY OF \_\_\_\_\_, ss.

Jim R. Baird (Employee of Operator) or (Operator) of 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 as filed that the same are true and correct, so help me God.

(Signature) Jim R. Baird

(Address) Box 428 Logan, KS 67646



AND SWORN TO before me this 19th day of July, 19 95

Marilyn J. Whitecette  
Notary Public

My Commission Expires: 2-9-98