| STATE OF KANSAS | METT braces | | | 15-160 2 Adus - | • | |
|--|-----------------------------|-------------|-----------------|---|------------------|--|
| STATE CORPORATION COMMISSION | No No No - 5 | 2-3-117 | | MBER 15-147-20042- | | |
| 30 S. Market, Room 2078 ichita, KS 67202 | | | | LEASE NAME O'WE' | | |
| | TYPE OR | | AETT W | WELL NUMBER | | |
| n. | OTICE: Fill on and return t | o Cons. Div | | Ft. from S Section | Line | |
| | office withi | | | ft. from E Section | 1184 | |
| LEASE OPERATOR Buch Oil Boduction | | | |) TWP. / RGE./8 (E) | | |
| ADDRESS RRI BUX 28 Phillipsbury Ks. 67661 | | | | | | |
| | | | | Phillips | | |
| PHONE \$ (787) 476-5254 OPERATORS LICENSE NO. 3/569 | | | | Date Well Completed | | |
| Character of Well Oil | | | | Plugging Commenced 12-12-98 | | |
| (OII), Gas, D&A, SWD, Input, Water | - Supply Well) | | Pluggi | ng Completed 12-17-9 | 98 | |
| The plugging proposal was approve | ed on | x 2 1998 | <u> </u> | | date) | |
| by Demis Hand | • | | | CC District Agent's N | | |
| Is ACO-1 filed? May yes if no | | | | - | ame,. | |
| 73 (4) | T, IS WELL IC | у аттаслес? | - 90 | 7/1 7/15 | | |
| Producing Formation 3380 | Depth to | Top | Bot | tom 3700 T.D. 393 | | |
| Show depth and thickness of all w | mater, oil and | gas format | ions. | | | |
| OIL, GAS OR WATER RECORDS | | | CASING REC | ORD | | |
| Formation / Content | From To | Size | Put In | Pulled out | | |
| Lensing /KC | | | | | | |
| | | | | | | |
| | | | | | | |
| Describe in detail the manner in placed and the method or methods | which the well | was plugge | d, indica | ing where the mud fi | uid wa | |
| very used, state the character | of same and | denth nier | 4 | 100+ +0 100+ 00 | | |
| to Surf poll to Sa | W50 5+ CU | Jp01 100 | 500 # CM | 4 300 NO115 70 | Cir | |
| 83/8 20 255* | w//00 hulls | 5 | | The spir- code has processing the spiral and the processing the spiral and the sp | | |
| <i>j</i> | | | | dente en sag de saglica de la seguira. de saglica de la seguira de la seguira. | | |
| dame of Plugging Contractor | Allied Con | nentily | | License No. 5 | | |
| Address Hays 145, | • |) | | | | |
| NAME OF PARTY RESPONSIBLE FOR PLU | GRING FFFS: | Buch O | 1 Pale | ction 0 or | | |
| STATE OF Kounsas | | Phillips | 1 VI Gen | | | |
| 7-01/3c3 | COUNTY OF | - PP11125 | | _,ss. 0 | Section (1) | |
| sbove-described well, being first | duly sycen or | (| Employee o | of Operator) or Opera | ators o | |
| statements, and matters herein | bns benistnoo | the log of | the above | described well as fil | racts led tha | |
| the same are true and correct, so | help me God. | (Signature | 1 Jan | Bal | | |
| | | (Address) | 1 | <i>y</i> | | |
| SUBSCRIBED AND S | WORN TO bada | | 00 | | 00 | |
| 3003CK10ED AND 3 | HONE TO DETOFE | me in 13 | au day | ,07,19 | 99 | |
| | | _ Vla | Not Not | rary Public | | |
| My Commission Ex | pires: 6-10 | 6-2002 | | • | | |