

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

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

API NUMBER 15-147-30100-00-00

LEASE NAME William C Kent

WELL NUMBER #2

         Ft. from S Section Line

         Ft. from E Section Line

SEC. 22 TWP. 1 RGE. 18 NE or (W)

COUNTY Phillips

Date Well Completed 5-18-1970

Plugging Commenced 9-1984

Plugging Completed 1-4-1985

Did you notify the KCC/KDHE Joint District Office prior to plugging this well? Yes

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

LEASE OPERATOR L & F Oil Operators

ADDRESS Box 415 Plainville, KS 67663

PHONE# (913) 434 2830 OPERATORS LICENSE NO. 5706

Character of Well Water

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

Did you notify the KCC/KDHE Joint District Office prior to plugging this well? Yes

Which KCC/KDHE Joint Office did you notify? Hays

Is ACO-1 filed?          If not, is well log attached? Yes

Producing Formation Lansing K C Depth to Top 3344 Bottom          T.D. 3583

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
				5"	3583	
				8"	200	

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.

Kent #2 W L Plug set 3150 Kelso shot hole in pipe 1512  
Allied mixed 125 sks cement pump down hole 4 1/2 casing Max pres 800# 400# shut inn pres  
Allied Mixed 125 sks cement W/ 2sks hulls down between 85/8 & 4 1/2 casing max pres 400#  
shut in pres 150 # Cap/ cement

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

Name of Plugging Contractor STATE CORPORATION COMMISSION License No.         

Address MAR 29 1985

STATE OF CONSERVATION COUNTY, MO. ss. Wichita, Kansas

(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) Harlan E. Meade

(Address) Box 415 Plainville, KS 67663

SUBSCRIBED AND SWORN TO before me this 27 day of March, 1985

Harlan E. Meade  
Notary Public

My Commission Expires: 2-15-86

