WEL	.L	PI	LU	GG	1 N	G	RE	CORD
	K.	Α.	_R		82	-3	-1	17

STATE OF KANSAS STATE CORPORATION COMMISSION 200°Colorado Derby Building Wichita, Kansas 67202	K.A.R82-3-117	API NUMBER 15-039-20564 -00 C LEASE NAME HUFF WELL NUMBER C-1		
	TYPE OR PRINT			
	NOTICE: Fill out completely and return to Cons. Div.	660 Ft. from S Section Line		
•	office within 30 days.	Ft. from E Section Line		
LEASE OPERATOR <u>W.W.Sauvage</u> ,	SEC. 9 TWP. 15 RGE. 28 XXXXX (W)			
ADDRESS P.O. Box 132	COUNTY DECATUR			
PHONE#(913) 475-2241 OPERA	Date Well Completed 9-3-81			
Character of Well GOOD	Plugging Commenced 8-30-90			
(Oil, Gas, D&A, SWD, Input, Wa	Plugging Completed 10:45 A.M.			
		(date)		
		(KCC District Agent's Name).		
Is ACO-1 filed?If				
		Bottom 3350 T.D. 3586		
Show depth and thickness of al				
OIL, GAS OR WATER RECORDS		SING RECORD		
Formation Content		Put in Pulled out		
	SURFACE 249' 8 5/8 " SURFACE 3586 4 1/2"	249' 4' CUT OFF 3586' 6' CUT OFF		
placed and the method or meth were used, state the charac	ods used in introducing it in	, indicating where the mud fluid water the hole. If cement or other plued, from feet to feet each se		
(If additional desc	ription is necessary, use BA(CK of this form.)		
		License No 5287		
Address		INC		
STATE OF KANSAS				
HERBERT H. SEEMAN above-described well, being fi statements, and matters here the same are true and correct,	rst duly sworn on oath, says: in contained and the log of 1	Employee of Operator) or (Operator) That I have knowledge of the fact the above-described well as filed th P.O. BOX 132		

Name of Plugging Contractor	HALLIBURTON SERVICES	License No. 5287
Address	OBERLIN, KANSAS	
NAME OF PARTY RESPONSIBLE F	OR PLUGGING FEES: W. W. SAUVA	GE, INC.
STATE OF KANSAS	COUNTY OFDECATUR	,ss.
statements, and matters he the same are true and correspond to the same are true are true and correspond to the same are true are	erein contained and the log of ct, so help me God. (Signature of the second of the log	(Employee of Operator) or (Operator) or ys: That I have knowledge of the facts of the above-described well as filed that re) P.O. BOX 132 13 day of September 1990 What A. Sharan
my Appt. Exp. Sept. 27 1333	ion Expires: $9-27-93$	Form CP-4 Revised 05-88