

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

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

15-153-05228-00 -00

API NUMBER 6-26-60

LEASE NAME Cahoj

WELL NUMBER 16

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

3300 Ft. from S Section Line

660 Ft. from E Section Line

SEC. 9 TWP. 1 RGE. 34 (E) or (W)

COUNTY Rawlins

LEASE OPERATOR RAMA Operating Co., Inc.

ADDRESS P.O. Box 159, Stafford, Ks. 67578

PHONE# (316) 234 5191 OPERATORS LICENSE NO. 3911

Date Well Completed _____

Character of Well Oil

Plugging Commenced 8/21/90

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

Plugging Completed 8/21/90

The plugging proposal was approved on 5-3-90 (date)

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

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

Producing Formation KC-Lansing Depth to Top 3966 Bottom 3972 T.D. 4271

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
KC-Lansing	Longstring	3966	3972	2 7/8	4271	
	Surface pipe			8 5/8	373	

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. Tubing parted 1850. tie onto tubing miz and pump down tubing, circulated cement blend to surface tied on to 8 5/8 and sq w/300 sks cement blend w/500 lbs. hulls mixed in to max psi 300 lbs. Close in psi 150 lbs.

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

Name of Plugging Contractor Poe Well Service; Allied Cement License No. _____

Address Russell, Ks.

RECEIVED
STATE CORPORATION COMMISSION

NAME OF PARTY RESPONSIBLE FOR PLUGGING FEES: _____

OCT 10 1990

STATE OF Kansas COUNTY OF Stafford, ss.

CONSERVATION DIVISION
Wichita, Kansas

RAMA Operating Co., Inc.

(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) [Signature]

(Address) P.O. Box 159, Stafford, Ks. 67578

SUBSCRIBED AND SWORN TO before me this 5 day of Oct., 19 90

Billie Postier
Notary Public

My Commission Expires **BILLIE POSTIER**
Notary Public - State of Kansas
My Appt. Expires Feb. 21, 1992