

15-039-00032-00-00

STATE OF KANSAS
STATE CORPORATION COMMISSION

Give All Information Completely
Make Required Affidavit
Mail or Deliver Report to:
Conservation Division
State Corporation Commission
800 Bitting Building
Wichita, Kansas

WELL PLUGGING RECORD

NORTH

Odle # 1			
NW-NW-SE			
Sec. 14-2-26			
Decatur County, Kansas			
		0-	

Locate well correctly on above
Section Plat

Decatur County. Sec. 14 Twp. 2 Rge 26 (E) W (W)
 Location as "NE/CNW%SW%" or footage from lines NW-NW SE
 Lease Owner Brooks Hall
 Lease Name Odle # 1 Well No. #1
 Office Address Box 14990 Oklahoma City, Okla
 Character of Well (completed as Oil, Gas or Dry Hole) Dry Hole
 Date well completed 4-16 1952
 Application for plugging filed 4-16 19 52
 Application for plugging approved 4-16 19 52
 Plugging commenced 4-16 8:00 A.M. 19 52
 Plugging completed 4-16 4:00 P. M. 19 52
 Reason for abandonment of well or producing formation dryhole

If a producing well is abandoned, date of last production 19
 Was permission obtained from the Conservation Division or its agents before plugging was commenced? Yes verbal

Name of Conservation Agent who supervised plugging of this well Eldon Petty
 Producing formation Depth to top Bottom Total Depth of Well 3833 Feet
 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
Soil & Shale		0	169'	8 5/8	169'	None
K. C. Lansing		3333	3742		Dry	Dry
Arbuckle		3742	3783		Dry	Dry
T. D.			3833			

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 for each plug set.

Stirred pitts filled hole with heavy mud. Placed wood plug at 160'. Ran 1/2 sack hulls and 15 sacks cement on same. Filled hole with heavy muc to 40'. Ran 1/2 sack hulls and 10 sacks cement on same, filled hole to bottom of cellar.

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

Name of Plugging Contractor Strain Drilling Co.
 Address Box 188 Hays, Kansas

STATE OF Kansas, COUNTY OF Ellis, ss.

(employee of owner) or (owner or operator) of the 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 and that the same are true and correct. So help me God. T. C. Strain

(Signature) *T. C. Strain*
 Box 188, Hays, Kansas (Address)

SUBSCRIBED AND SWORN TO before me this 18th day of April, 19 52

My commission expires March 26, 1956
 Medred Schneider Notary Public.

PLUGGING
 FILE NO. (F T 2 R 26c)
 BOOK PAGE 9 LINE 25