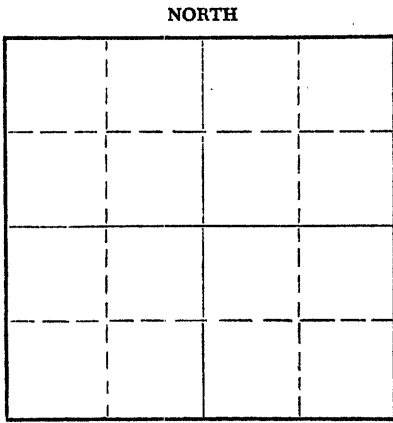


WELL PLUGGING RECORD

Give All Information Completely
Make Required Affidavit
Mail or Deliver Report to:
Conservation Division
State Corporation Commission
212 North Market, Insurance Bldg.
Wichita, Kansas



Locate well correctly on above Section Plat

Decatur County. Sec. 1 Twp. 2S Rge. (E) 28 (W)
Location as "NE/CNW/SW" or footage from lines NE NW
Lease Owner John O. Farmer, Inc.
Lease Name Thomsen Well No. 1
Office Address 370 W. Wichita, Russell, Kansas
Character of Well (completed as Oil, Gas or Dry Hole) Dry
Date well completed _____
Application for plugging filed 5-1/10 19 62
Application for plugging approved 5-1/10 19 62
Plugging commenced 5-1/10 19 62
Plugging completed 5-10-62 4/10 19 62
Reason for abandonment of well or producing formation _____

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

Name of Conservation Agent who supervised plugging of this well Elden Petty
Producing formation _____ Depth to top _____ Bottom _____ Total Depth of Well 4001 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

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.

First Plug set at 540 with 20 sacks.
Second Plug at 160 with 20 sacks.
Third Plug at 40 with 10 sacks.

RECEIVED
STATE CORPORATION COMMISSION
MAY 15 1962
CONSERVATION DIVISION
Wichita, Kansas

5-15-62

(If additional description is necessary, use BACK of this sheet)
Name of Plugging Contractor John O. Farmer, Inc.
Address 370 W. Wichita, Russell, Kansas

STATE OF Kansas, COUNTY OF Russell, ss.
John O. Farmer, INC.

(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.

(Signature) John O. Farmer
President
370 W. Wichita, Russell, Kansas
(Address)

SUBSCRIBED AND SWORN TO before me this 14th day of May, 19 62

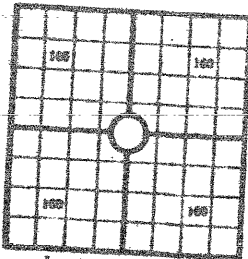
My commission expires 5/18/64

Dorothy Ratts
Dorothy Ratts Notary Public.

OPERATOR John O. Farmer, Inc.

ADDRESS P. O. Box 352, Russell, Kansas

800 Acres
N



COUNTY Decatur, SEC. 1, TWP. 28, RGE. 28W

COMPANY OPERATING John O. Farmer, Inc.

OFFICE ADDRESS 370 W. Wichita, Russell, Kas.

DRILLING STARTED 5/1/62, DRILLING FINISHED 5/10/62

DATE OF FIRST PRODUCTION _____ COMPLETED _____

WELL LOCATED C 1/4 NE 1/4 660 300 of South Line and _____ ft. _____ of West Line of Quarter Section

Elevation (Relative to sea level) DERRICK FLOOR 2578 GROUND 2576

CHARACTER OF WELL (Oil, gas or dryhole) Dry

OIL OR GAS SANDS OR ZONES

Name	From	To	Name	From	To
1			4		
2			5		
3			6		

Perforating Record If Any

Formation	From	To	No. of Shots	Shot Record		
				Formation	From	To

CASING RECORD

Amount Set								Amount Pulled		Packer Record	
Size	Wt.	Thds.	Make	Ft.	In.	Ft.	In.	Size	Length	Depth Set	Make

Liner Record: Amount _____ Kind _____ Top _____ Bottom _____

CEMENTING AND MUDDING

Size	Amount Set		Sacks Cement	Chemical		Method of Cementing	Amount	Mudding Method	Results (See Note)
	Ft.	In.		Gal.	Make				
8 5/8	164		120						

Note: What method was used to protect sands if outer strings were pulled?

NOTE: Were bottom hole plugs used? If so, state kind, depth set and results obtained

TOOLS USED

Rotary Tools were used from _____ feet to _____ feet
Cable tools were used from _____ feet to _____ feet
Type Rig _____

INITIAL PRODUCTION TEST

Describe initial test: whether by flow through tubing or casing or by pumping _____
Amount of Oil Production _____ bbls. Size of choke, if any _____ Length of test _____ Water Production _____ bbls. Gravity of oil _____ Type of Pump if pump is used, describe _____

FORMATION RECORD

Give detailed description and thickness of all formation drilled through, contents of logs, whether of water, oil or gas

Formation	Top	Bottom	Formation	Top	Bottom
Surface	0	164			
Shale & Sand	164	1155			
Sand & Shale	1155	1565			
Shale & Sand	1565	1780			
Shale	1780	2144			
Anhydrite	2144	2185	Anhydrite	2144	2144
Shale & Shells	2185	2600	Lansing KC	3454	3454
Line & Shale	2600	4001	Cherokee	3812	3812
R.T.D.	4001		Arbuckle	3941	3941
			Granite	3994	3994
			R.T.D.	4001	4001

Formation Tops:

15-039-00001-00-00

RECEIVED
STATE CORPORATION COMMISSION

SEP 26 1962

CONSERVATION DIVISION
Wichita, Kansas

John O. Farmer
Name and title of representative

14th day of May

5/18/62

Dorothy Rette