STATE OF KANSAS STATE CORPORATION COMMISSION

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

15-153-20760-00-00 API NUMBER 15-530-20760

200 Colorado Derby Building Wichita, Kansas 67202	LEASE NAME Eri	ickson 00-00
TYPE OR PRINT	WELL NUMBER	
NOTICE: Fill out <u>completely</u> and return to Cons. Div.	1980 Ft. from S Section Line	
office within 30 days.	<b>2970</b> Ft. fr	om E Section Line
LEASE OPERATOR Schulein Company	SEC. 24 TWP. 2	. RGE <b>. 32 (187</b> or <b>(</b> 18)
ADDRESS 1776 Lincoln St#811 Denver, CO 80203	COUNTY Rai	ulins
PHONE# (303) 839-5495 OPERATORS LICENSE NO. 6785		eted <u>//-/4-90</u>
Character of Well oil	Plugging Commenced 7-7-72	
(Oil, Gas, D&A, SWD, Input, Water Supply Well)	Plugging Comple	ted <u>7-2-92</u>
The plugging proposal was approved on		(date)
by David P. Williams	(KCC Distri	ct Agent's Name).
Is ACO-1 filed? YES If not, is well log attached?		
Producing Formation Lancing Depth to Top 3776	Bottom_4024	4 T.D. 4070'
Show depth and thickness of all water, oil and gas formation		`
OIL, GAS OR WATER RECORDS CAS	ING RECORD	
	ut in Pulled	out
	269'	6 <del>-</del>
307-322 7067 572		
Describe in detail the manner in which the well was plugged,		
placed and the method or methods used in introducing it intwere used, state the character of same and depth placed		
Pump 335 52x 65/35 poz mix down 5/2" C	asing - Start	w/15 59X 4
annulus & pressure to 600psi- annulus full.	Shut 5'2" Cos	ing in @ 1500psi
(If additional description is necessary, use BACK	of this form.)	
Name of Plugging Contractor Allied Cementing Co.	Lnc. License	No
Address P.O. Box 31 Russell Kansa	5 6766 STATE	RECEIVED  COMMISSION
NAME OF PARTY RESPONSIBLE FOR PLUGGING FEES:		ORPORATION COMMISSION
STATE OF KANSAS COUNTY OF KINGMAN	,SS.	JUL 17 1903-17-9-
	gent for CON	SERVADION (Operator) o
above-described well, being first duly sworn on oath, says: statements, and matters herein contained and the log of th	That I have know	Ted ga Kansas HOW facts
statements, and matters herein contained and the log of th the same are true and correct, so help me God.	above-describe	d well as filed that
(Signature)_	<u>Cal</u>	Mill IX Care
(Address)	Dox 16A:	3 Milton K) 6/106
SUBSCRIBED AND SWORN TO before me this 15	day of Jour	, 19 <u>92</u>
NOTARY PUBLIC	Notary Publ	<u> </u>
STATE OF KANSAS  My Appt. Exp 9/22/99mission Expires: SEpt. 22./	993	