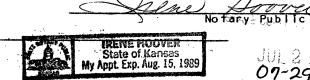
WELL PLUGGING RECORD

AP I	NUMBER.	15-137-	20315-00-00
,,,	HOMOLIN	יטיטו	100010

STATE OF KANSAS STATE CORPORATION	COMMISSION	K.A.R8	K.A.R82-3-117		API NUMBER 15-137-20315-00-00	
200 Colorado Dert fichita, Kansas	y Building 67202		,	LEASE N	AME <u>Derks</u>	
	TYPE OR PRINT			WELL NUMBER #2		
	•	NOTICE; Fill out complete and return to Cons. Do office within 30 days		***************************************	_ Ft. from S Section Line	
		`	,		Ft. from E Section Line SE NW SE	
7	/ / / / /	pany, Inc.		SEC.	_TWPRGE(E)or(W)	
DDRESS Logan, Kansas 67646				COUNTY Norton		
PHONE#(913)689-7456 OPERATORS LICENSE NO. 5352					li Completed	
Character of Well	0i1	Pluggin	g Commenced <u>5- 5-87</u>			
(OII, Gas, D&A,	SWD, Input, W	Pluggin	g Completed 7-22-87			
		ct Office prior t			Yes	
which KCC Office	did you noti	fy? Dist.	#6 Hays,	Kansas		
•		f not, is well lo				
					omT.D. 3557	
		il water, oil and			and the second s	
OIL, GAS OR WATE	ER RECORDS	1	C	ASING RECO	RD	
Formation	Content	From 11	o Size	Put In	Anna and a sure of the sure of	
					Pulled out	
			3-5/8" 5-1/2"		none 927'	
			<u> </u>	3332	321	
escribe in detail	I the manner	in which the wel	l was plugge	Indiant	ing where the mud fluid wa	
laced and the m	nethod or meti	hods used in intr	oducina it ir	ito the ho	le. If cement or other nim	
Plugged off	bottom with	ster of same and	depth place	ed, from	feet to feet each set	
1300', 927'	pulled a to	tal of 23 joints	of 5-1/2" ca	ent. Shot sing. Plu	pipe @1800', 1500',	
6 sacks hul	Is and 200 sa	cks econolite.			agged surface with	
Plugging Cor	iditional desc	cription is neces	sary, use BAC	K of this	form.)	
lame of Plugging	Contractor	Kelso Casing Pu	lling, Inc.		icense No. 6050	
Address P.O.	Box 347	Chase, Kansas 67	524			
TATE OF Kansa	as.	COUNTY OF	Rice		,55.	
Mike Kelso,	Vice-Preside	nt	15		NO	
bove-described	well, being	first duly sworn	on oath, says	: That I t	Operator) or (Operator) on avershow the sacts	
statements, and m	atters herein	n contained and t	he log of the	above-des	scribed well as filed tha	
ne same are true	and correct	, so help me God.	(Signature)	m	L. Illa	
			(Address)	Box 347	Kansas 67524	
•				vuasc.	11000 11/1/4	

My Commission Expires:

SUBSCRIBED AND SWORN TO before me this



28th

JUL 2 9 1987 Form CP-4
07-29-1987 Form CP-4
07-29-1987 Form CP-4

PARTIE ROWES