STATE OF KANSAS STATE CORPORATION COMMISSION 200 Cotorado Derby Building Wichita, Kansalive 202 KCC DISTRICT #2

AUG 1 2 2004

WICHITA, KS

Character of Well Good

by ____ David P. Williams

LEASE OPERATOR _______________________OIL

ADDRESS 302 E. Sycamore, Ness City, KS 67560

(OII, GaskxQ&Akx&WQkxkqqutxxWataqxxquqxxxxddxx)

OIL, GAS OR WATER RECORDS

The plugging proposal was approved on $\frac{5/3/04}{}$

PHONE # (785) 798-2893 OPERATORS LICENSE NO. 9615

is ACO-1 filed? Yes if not, is well log attached?

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

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

330 Ft. from \$ Section Line

1650 Ft. from F Section Line SEC. 13 TWP. 16 RGE. 27 **EXXX**(W)

API NUMBER 15-101-20027-00-01

COUNTY Lane Date Well Completed 6-11-1986 Plugging Commenced 7/14/04

Plugging Completed $\frac{7/14/04}{}$

___(date)

(KCC District Agent's Name).

Producing Formation <u>Ft. Scott, KC</u> Depth to Top______ Bottom______T.D. 4681 Show depth and thickness of all water, oil and gas formations.

CASING RECORD

Formation	Content	From	То	Size	Put- In	Pulled-out
					HOW I SEE TO BE A SEE	of states to the becomes processing to the control of the control
and the second s	The state of the s	35.				
	The state of the s	102 112				
escribe in detail	the manner in which	ch the wo	l <u> </u>	s plugge cing it i	d, indicat nto the ho	ing where the mud fluid wa ie. If cement or other plug

were used, state the character of same and depth placed, from feet to feet Pump 10 sx down bradenhead, pump 40 sx down $5\frac{1}{2}$ " CSG. with 400# hulls, 16 sx gel down feet each se 190 sx cement, 5 seconds to fluid for 15 minutes, order 30 sks 574 cmt for top off

Top off well. Stay full (if additional description is necessary, use BACK of this form.)

Name of Plugging Contractor Swift Services, Inc. License No. Address <u>Ness City. KS</u>

STATE OF Kansas _____COUNTY OF Ness

kEmptoxeexofxOperatorixor (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)

(Address)

and the second s DEBRA L. STENZELBED AND SWORN TO before me this **NOTARY PUBLIC** STATE OF KANSA

UD LU	G ,		WELL NO.		SWIFT Se	
108 68	restile a	M 60.	WELL NO.		HORCHE	JOB TYPE PTA TICKET NO.
CHART NO.	TIME	RATE (BPM)	VOLUME (BBL) (GAL)	PUMPS T C	PRESSURE (PSI) TUBING CASI	DESCRIPTION OF OPERATION AND MATERIALS
	0930	15,	(1009/10/10)		TODAY OACH	ON FOCUSION
	<u> </u>					00 x00x200
						5'/2 e 4598'
						82/8 < 330 '
		************************************				BU e 2050
						PRETS: 4104 TOP - 4440 BM
		***************************************				<u> </u>
					<u> </u>	
	1000		3	<u> </u>	50	PUMP 10 SKS CMT BOWN BRASH HAS - PS UP
	1015	<u> </u>	12_		0	PUMP 40 5KS OMT DOWN 51/2 CSG W/ 400"1
			<u>48</u>	<u> </u>	0	PUMP 16 SKS GEE "
	1045	·	36		.0	PUMP 190 XX ONT "
					√A	- 12p
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		W				S SHOULD FINED TOR 15 SHOULD
						ORAGE 30 SM STADORS COMMY FOR TOP OFF
	1300		6			TOPOFF WILL - STAY FULL to Son for
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	1400					JUR COMPUTE
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