STATE OF KANSAS

WELL PLUGGING RECORD

15-137-00755-00-00

STATE CORPORATION CO	MMISSION	K.A.R.+82-3-117			LEASE NAME Scott			
200 <i>C</i> olorado Derby B Wichita, Kansas 672	uilding 102							
•		TYPE OR PRINT NOTICE: Fill out completely and return to Cons. Div.			WELL NUM	WELL NUMBER 2		
					4620	Ft. from S Section Line		
	office within 30 days.) days.	1320	_ Ft. from E Section Line		
LEASE OPERATOR Gore Oil Company				SEC. 1	TWP. 45 RGE. 24 (KEXXXXXX)			
ADDRESS P.O. Box 2757, Wichita, KS 67201-2757				COUNTY _	Norton			
PHONE#(316) 263-3535 OPERATORS LICENSE NO. 5552					Date Wel	II Completed 12-53		
Character of Well <u>oil</u>						g Commenced <u>5-3-91</u>		
(Oil, Gas, D&A, SWD, Input, Water Supply Well)					Plugging	g Completed <u>5-3-91</u>		
The plugging proposa	ıl was approved o	n	4-30	0-91		(date)		
by Carl Goodrow						C District Agent's Name).		
is ACO-1 filed? no	lf not,	is well	log a	ttached?	See CP-1			
•						om <u>3809'</u> T.D. <u>3809'</u>		
Show depth and thick								
OIL, GAS OR WATER R		1	_		ASING RECOF	RD		
	Content	From	То	Size	Put in	Pulled out		
		0	241	8 5/8"	·	0'		
Arbuckle	Oil, water	0		5 1/2"	38061	0'		
Describe in detail to blaced and the meth	the manner in whi nod or methods us	ch the w	ell water	as plugged cing it in	d, indicati nto the ho	ing where the mud fluid wa le. If cement or other plug		
were used, state t	he character of	same a	nd de	pth plac	ed, from_	_feet tofeet each set		
bbls. gel. 175 sx 6	<u>ig 2050° and 12/5</u> 55/35, 10% gel w/	Pump 100# hul	ls. I	Maximum pi	ressure 800	10% gel w/200# hulls, 40 0 psi. Pump down		
8 5/8"-5½" annulus complete.	150 sx 65/35, 10	% gel w/	100#	hulls. Ma	aximum pre	O psi. Pump down ssure 300 psi. Plugging		
	tional descriptio	n is nec	essar	y, use <u>BA</u>	CK of this	form.)		
Name of Plugging Con	ntractor <u>B.J.</u>	Service	S			License No.		
Address <u>Hays, KS</u>						STATE OF SOMMISSK		
NAME OF PARTY RESPON	SIBLE FOR PLUGGI	NG FEES:		Gore Oil (Company	MAY 2.3 1991		
STATE OF Kansas	co	UNTY OF	Se	dgwick		_,ss. 05-23-1991		
Scott W Scheuerman				· (1	Employee o	f Operator) akxkukakakakx		
above-described well statements, and ma	l, being first du atters herein con	lly sworn stained a	on o	ath, says: e log of :	: That I ha the_above-	ave knowledge of the facts described well as filed tha		
the same are true an			d •	Signature	()	S Sayer -		
						2757, Wichita, KS 67201-275		
SHE	SSCRIBED AND SWOR	N TO bef						
REBECCA K. CRAWFO	er reconstruing.	501	• ····	Lo hon		Travelor of		
State of Kanses Wy Appt. Exp.	75		7 OF	Janes	Not	ary Public		
	- Commission Expir	es:	-/-90			. U		