STATE OF KANSAS STATE CORPORATION	MHISSION	WELL PLUGGING RECORD  K.A.R82-3-117			API NUMBER 15-039-20,928-00-00					
200 Colorado Derby Wichita, Kansas	Building				LEASE NA	ме <u> </u>	ringer	"A"		
		TYPE OR PR		τ	WELL NUM	BER1				
JAN OI KCC	103203 NOTICE -03-3003 NOTICE -03-3003 And -04-3003 And -04-300 And -04-300 And -04-300 And -04-300 And -04-300 And -04-30	OTICE: Fill out completely and return to Cons. Div. office within 30 days.			660 i	_ Ft. f _ Ft. f	rom XV rom (E)	/ Section Section	Line Line	
LEASE OPERATOR Pickrell Drilling Company, Inc.						SEC. 8 TWP. 45 RGE. 28 (X) or (W)				
ADDRESS 100 S. Main, Suite 505 - Wichita, KS. 67202-3738						COUNTY Decatur				
PHONE#(316) 262-8427 OPERATORS LICENSE NO. 5123								12-14-0		
Character of Well D&A						Comme	nced _	12-14-0	2	
					Plugging	Compil	eted _	12-14-0	2	
The plugging propos				2				( d	ate)	
by <u>Herb D</u>					(KCC	Distr	ict Ag	ent's Na	me).	
Is ACO-1 filed?										
Producing Formation	None	Depth to	о То	P	Botto	» m	T.D	4100'		
Show depth and thic										
OIL, GAS OR WATER		<u> </u>			SING RECOR	RD				
•	Content	From To	• [	Size	Put In	Pulled	out			
	Surface Casing			8 5/8"	260¹KB	•				
Describe in detail placed and the met were used, state P&A as follows: 40 60-40 poz, 6% gel.  Deines	hod or methods us the character of lsx 0 25501, 40sx (	ed in intro same and 1750', 40	oduc dei Osx	ing it ing the input of the place of the input of the inp	nto the hole ed, from Osx @ 40 <sup>1</sup> ,	feet _feet _15sx =	to f fo RH,	eet ead 10sx in	n plu	
(If addi	tional descriptio	n is neces	sary	, use BA	CK of this	form.)			<u>,, , , , , , , , , , , , , , , , , , ,</u>	
Name of Plugging Co	ontractorPickre	ell Drillin	g Co	ompany, I	າc. ເ	.1cense	No	5123		
Address P.O. Box	1303 - Great Bend,	Kansas 6	7530	)						
NAME OF PARTY RESPO	NSIBLE FOR PLUGGI	NG FEES: _	P-	ickrell D	rilling Co.	Inc.				
STATE OF Kansas	co	UNTY OF	Se	edgwick		_,ss.				
Pickrell Drillin above-described wel statements, and m the same are true a	l, being first du atters herein con	tained and	the	th, says	the above-	ve kno	≪n)ledge	of the	fact	
				ignature	C. W.		s, Pre			
				(ddress)		ta Ka Dece	, Suite nsas	67202-37	38,	
A MUTARY PUBLIC - State	EWIS	N TO befor	e me	#11s 2	della		Xo	elle	<u>2002</u>	
My Appt. Exp. 4	<u>(6°06)</u> / Commission Expir	es:6-0	06-0	6	NOT	ary Pub	ri i/C			