STATE OF KANSAS STATE CORPORATION COMMISSION 200° Colorado Derby Building Wighita, Kansas 67202

WELL	PLUGGIN	G RECOI	RD 1
	. PLUGGIN (.A.R82	-3-117	#"
	000116	00	10 -

15-147-00546-00-00

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

Well was completed on: API NUMBER 5-12-1942								
LEASE NAME Wallgren A								
WELL NUMBER1								
Ft. from S Section Line								
Ft. from E Section Line								
SEC. 29 TWP. 55 RGE. 20 (**** (W)								

	OŦ	TICE WITE	1111)	uays.		Ft. from E Section Line	
LEASE OPERATOR OXY USA Inc.					sec. 29 TWP. 55 RGE. 20 (4)		
ADDRESS P. O. Box 26100, Oklahoma City, OK 73126-0100						Phillips	
PHONE#(405) 749-2000 OPERATORS LICENSE NO. 5447							
Character of Well <u>0il</u>						g Commenced <u>1-27-1989</u>	
(Oll, Gas, D&A, SWD, Input, Water Supply Well)					Pluggin	g Completed <u>1-27-1989</u>	
•						(date)	
					1		
by Mr. Dennis Ha	amel of Dist. #4	·.			- (KC	C District Agent's Name).	
Well was (completed on: $12-1942$ If not,	is well	log a	ttached?	yes		
Producing Formation	Arbuckle	Depth	to To	o p	Bott	omT.D	
Show depth and thic	kness of all wate	r, oil a	nd gas	s formati	ons.		
OIL, GAS OR WATER RECORDS CAS						RD	
Formation .	Content	From	1	1	Ì	Pulled out	
Arbuckle	011	3605	3620	8-5/8"	176'	0	
				5-1/2"	3626	0	
Describe in detail.	the manner in whi	ch the w	ell wa	as plugged	d, indicat	ing where the mud fluid was le. If cement or other plugs	
were used, state	the character of	same a	nd de	pth plac	ed, from_	feet tofeet each set.	
Ran in well & nerf.	. Anhydrite at 173	30 & Dako	ta fo	rmation a	t. 930 w/2	SPF. Tied onto the	
5-1/2" csg. & fille	ed to surf. w/125	sx 65/3 & fille	5 Poz	. w/10% g annulus	<u>el + 2% ec</u> to surf. w	colite & 75 sx of hulls. v/50 sx cmt. & 4 sx	
of hulls State W	itness: Mr Denni	s Hamel	-		i ,		
(If add	itional descriptio	n is nec	essar	y, use <u>BA</u>			
Name of Plugging Co	ontractorOstr	om Well	Servi	ce Inc.		LicensREGETVENMISSION	
Address Route 1, I					•	SINIEO	
NAME OF PARTY RESPO		k.				FFB 6 1989	
						2 10-89	
STATE OF Oklahom	aco	UNTY OF	UK	lahoma		- CALCONALIM MANAGE	
Bryan Humphries			.,	(Employee o	of Operation (Operator) o	
above-described well	il, being first du	ily sworn	on o	ath, says	: That I h	have knowledge of the facts described well as filed that	
the same are true a				9 10g 01	2	00/	
				Signature	Sypl	· frage	
			(Address)	P. 0. Box	26100, OKC, OK 73126-0100	
St	UBSCRIBED AND SWOR	RN TO bef	ore m	e this 2	nd day	of February ,19 89	

Marsha

4-1-92

My Commission Expires:___

Notary Public