15-137-00548-00-00

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

API NUMBER _____

LEASE NAME Fee

WELL NUMBER E-5

SPOT LOCATION C W/2 W/2 W/2

SEC. 26 TWP. 5S RGE. 21W (E)or(

COUNTY Norton

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

LEASE OPERATOR Dane G. Hanson Trust

ADDRESS Box 187 Logan, Kansas 67646

PHONE # (913) 689-4816   OPERATORS LICENSE NO. 5285

Character of Well ___ Oil
(Oil, Gas, D&A, SWD, Input, Water Supply Well)

Date Well Completed _____

Plugging Commenced 3-31-86

Plugging Completed 4-4-86

Did you notify the KCC/KDHE Joint District Office prior to plugging this well? Yes

Which KCC/KDHE Joint Office did you notify? Hays, Kansas

Is ACO-1 filed? _____ If not, is well log attached? _____

Producing formation _____ Depth to top _____ bottom _____ T.D 3654'

Show depth and thickness of all water, oil and gas formations.

OIL, GAS OR WATER RECORDS				CASING RECORD		
Formation	Content	From	To	Size	Put In	Pulled out
				8-5/8"	180.45	none
				5-1/2"	3650'	1213'

Describe in detail the manner in which the well was plugged, indicating where the mud fluid was placed and the method or methods used in introducing it into the hole. If cement or other plugs were used state, the character of same and depth placed, from __feet to __feet each set. _____

Plugged off bottom with sand to 3600' and 5 sacks cement. Shot pipe @1618', 1213' and pulled a total of 38 joints (1213') of 5-1/2" casing. Plugged surface with 3 hulls, 20 gel, 100 cement, 11 gel and 80 cement.
Plugging Complete.

(If additional description is necessary, use BACK of this form.)

Name of Plugging Contractor Kelso Casing Pulling   License No. 6050
Address P.O. Box 347 Chase, Kansas 67524

STATE OF Kansas   COUNTY OF Rice   ,ss.

R. Darrell Kelso
                                (employee of operator) or
(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) Box 347 Chase, Kansas 67524

SUBSCRIBED AND SWORN TO before me this 9th day of April , 19 86

_____
Notary Public

My Commission expires: _____

RECEIVED
STATE CORPORATION COMMISSION
APR 13 1986
CONSERVATION DIVISION
Wichita, Kansas

Form CP-4
Revised 01-84