STATE OF KANSAS STATE CORPORATION COMMISSION 200 Colorado Derby Building Wichita, Kansas 67202		UGGINO R82-3	G RECORD 3-177		API NUMBER <u>15-137-20,197</u> — 06-06		
·	TYPE OR PRINT NOTICE: Fill out completely and return to Cons. Div. office within 30 days.				WELL NUMBER 2		
					2970 Ft. from E Section Line		
LEASE OPERATOR R.P. Nixon Operations, Inc.					SEC. 12 TWP. 5S RGE. 22W (E)or(W)		
ADDRESS 207 West 12th Street Hays, KS 67601					COUNTY Norton		
PHONE #(913) 628-3834 OPERATORS LICENSE NO. 5252					Date Well Completed9/26/80		
Character of Well oil					Plugging Commenced 9/27/94		
(Oil, Gas, D&A, SWD. Input, Water Supply Well)					Plugging Completed 9/27/94		
The plugging proposal was approved on _							
						ate)	
					KCC District Agent's Nam	ıe).	
Is ACO-1 Filed? <u>yes</u> If not, is we						Management .	
Show depth and thickness of all waters of				230' Botto	om <u>3479</u> T.D. <u>347</u> 9	<u>9'</u>	
Show depth and thickness of all water, oi OIL, GAS, OR WATER RECORDS	and gas form	nations.					
Formation				CASING REC			
Content	From	То	Size 8%"	Put in 263'	Pulled out		
			4½"	3474'	none	_	
Describe in detail the manner in which the method or methods used in introducing it same and depth placed, from feet to Ran tubing to 1410' and pumped 50 sx 6 type of cement. Well circulated cement ISIP was 200#. Job complete at 2:35 pr	50/40 Poz, 10 to surface. Pu	% gel. ulled tu	Pulled tubi bing out. P	ng to 900' ar umped down	nd pumped 50 sx of same 4½" w/200 sx @ 500#.	he of	
(If additional des					Pa	***************************************	
Name of Plugging Contractor <u>Jay-Lan Cor</u> Address <u>207 West 12th St. Hays, KS</u>		W-10-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1	***************************************		License No. 5128	-	
NAME OF PARTY RESPONSIBLE FOR PLU		R.P. N	ixon Oper	Inc	-9, 8, 30, 20, 20, 20, 20, 20, 20, 20, 20, 20, 2		
STATE OF Kansas COUNTY OF Ellis ,ss.						<u>, y</u>	
Dan A. Nixon well, being first duly sworn on oath, says contained and the log of the above-describ	s: That I hav ed well as file	(<u>Em</u> ed knoved ed that	ployee of C vledge of th the same a	<u>perator</u>) or (C ne facts, state re true and co	perator) of above describements, and matters here rrect, so help me God.	êd. ein	
		(5	Signature)	Hali.	hip 10-	2f-9	
•					St. Hays, KS 67601	_	
SUBSCRIBED AND	SWORN TO b	efore m	olie C	day of Oct	nober, 19 <u>94</u>		
My Commission Exp	oires: <u>5-</u>	24-9	77	A NOTARY PUBL	IC - State of Kansas E VONLINTEL Exp. 5-24-77 Form CP- evised 05-8	-4 38	