STATE OF KANSAS

WELL PLUGGING RECORD

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STATE CORPORATION COMMIS		TYPE OR PRINT TYPE OR PRINT NOTICE: Fill out completely				API NUMBER 15-039-20,342-00-0C LEASE NAME Robertson SWD WELL NUMBER #2		
200 Colorado Derby Bullo Wichita, Kansas 67202	ding							
4								
							Section Line	
		and return to Cons. Div. office within 30 days.			And the second			
					776	_ Ft. from E	Section Line	
LEASE OPERATOR A.L. Abercrombie Inc.					SEC21	TWP.5 RGE.	<u>30</u> (₹)or(₩)	
ADDRESS RT 1 Box 56 Great Bend, Ks. 67530					COUNTY	Decatur		
PHONE# (316 793-8186 OPERATORS LICENSE NO. 5393					Date We	II Completed	6-24-1976	
Character of Well <u>SWD well</u>					Pluggin	g Commenced _	10-17-1990	
(Oll, Gas, D&A, SWD, Input, Water Supply Well)					Plugging	g Completed _	<u>10-17-1990</u>	
The plugging proposal wa	as approved o	n <u>July</u>	, 23	<u>,1990</u>			(date)	
by <u>David P. Willi</u>	ams Ha	ys, Kan	sas-		(KC	C District Ag	ent's Name).	
is ACO-1 filed? yes	lf not,	is well	log a	ttached?			THE OF THE WORK HOLD IN THE CONTROL OF THE CONTROL	
XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	dar Hills	Depth	to To	op 2356	Botte	om 3404 T.D	. 4112	
Show depth and thickness		1						
OIL, GAS OR WATER RECOF	RDS			C.F	SING RECOF	RD		
Formation Conte		From	То	Size	Put in	Pulled out		
	<u>ater</u>	2356		103/4"		none_		
		-		7"	<u> </u>	none		
Describe in detail, the m								
placed and the method of were used, state the o								
mix 500# hull								
casing. Max p								
50 sys noz-sh	$\frac{1+\sin w}{3}$)O# stai	ndino	r State	e man Ca	rl Goodrow	<u>- down ann </u>	
50 sys poz-sh	descriptio	n Is nec	essar	y, use BAC	K of this	form.)		
Name of Plugging Contrac	:tor	<u> A.L.</u>	Aberc	rombie	Inc. '	icense No	5393	
Address Rt. 1 Box 5	6 Creat Bo	end , K	ansas	67530				
NAME OF PARTY RESPONSIBL	E FOR PLUGGI	NG FEES:	<u>. A.</u>	<u>L. Aber</u>	crombie_	Inc.		
STATE OF Kans	as co	UNTY OF	Ва	rton		_,ss		
E. I. Abe	rcrombie			(E	Employee of	f Operator) o	r (Operator) o	
above-described well, be	ning first du	ly sworn	on oa	th, says:	That I ha	ve knowledge	of the facts	
statements, and matter the same are true and co				∍ log of t	he above-o	described wel	l as filed tha	
The same are frue and co	, , , , , , , , , , , , , , , , , , , ,	ine ou	(9	Signature)	_ELG	Cleveronh	ie	
			(/	\ddress)	AT 1	Box 56 6	rest bendy	
SUBSCRI	BED AND SWOR	N TO befo	ore me	θ this 9	th day o	of Movembe	19 <u>90</u>	
				Deho	capt to		MINISSION	
		-		-	Nota	ry Public		

My Commission Expires: 3-1-92DEBORAH K. AMMERMAN
Notary Public - State of Kansas
My Appt. Expires 3-1-92

NOV 1 3 1990