

STATE OF KANSAS  
STATE CORPORATION COMMISSION  
130 S. Market, Room 2078  
Wichita, KS 67202

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

~~15-163-2018-06-01~~  
API NUMBER ~~15-163-2018~~

15-163-19072-00-01

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

LEASE NAME Melton  
WELL NUMBER 1  
2970 Ft. from S Section Line  
4950 Ft. from E Section Line  
SEC. 18 TWP. 7 RGE. 6 (E) or (W)  
COUNTY Rooks  
Date Well Completed \_\_\_\_\_  
Plugging Commenced 03-01-99  
Plugging Completed 03-01-99

LEASE OPERATOR Big Horn Oil, Inc.  
ADDRESS P.O. Box 263 Great Bend, KS 67530  
PHONE# (316-) 793-3160 OPERATORS LICENSE NO. 31174  
Character of Well Oil  
(Oil, Gas, D&A, SWD, Input, Water Supply Well)

The plugging proposal was approved on 03-01-99 (date)  
by Rick Williams (KCC District Agent's Name).

Is ACO-1 filed? Yes If not, is well log attached? \_\_\_\_\_

Producing Formation \_\_\_\_\_ Depth to Top 2636' Bottom 2642' T.D. 3280'  
Show depth and thickness of all water, oil and gas formations.

OIL, GAS OR WATER RECORDS		CASING RECORD				
Formation	Content Surface	From	To	Size	Put in	Pulled out
		-0-	114	8 5/8"	114	None
	Production	-0-	3279	4 1/2"	3279	None

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 plug were used, state the character of same and depth placed, from \_\_\_ feet to \_\_\_ feet each set.  
Allied pumped down 4 1/2" 150 sacks 60/40 10% gel with 500# Hulls. Maximum pressure 700#, shut in pressure 200#. Job started 10:45 a.m. and finished 11:15 a.m.

Name of Plugging Contractor D.S. & W. Well Servicing, Inc. License RECEIVED  
Address P.O. Box 231 Claflin, KS 67525 KANSAS CORPORATION COMMISSION

NAME OF PARTY RESPONSIBLE FOR PLUGGING FEES: Big Horn Oil, Inc. MAR 16 1999

STATE OF Kansas COUNTY OF Barton, ss. 3-16-99

Joseph F. Strube (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) Joseph F. Strube  
(Address) P.O. Box 231 Claflin, KS 67525

SUBSCRIBED AND SWORN TO before me this 2nd day of March, 19 99

Brenda Urban  
Notary Public  
My Commission Expires: Nov 14, 2001

BRENDA URBAN  
Notary Public - State of Kansas  
My Appt. Expires Nov 14, 2001  
Form CP-1 Revised 05-88