STATE OF KANSAS

WELL PLUGGING RECORD

STATE CORPORATION C 2 00 Cof orado Derby		* ************************************			API NUMB	API NUMBER 13-163-21,972-00-0		
lichita, Kansas 67						LEASE NAME CITY OF STOCKTON		
	MOTI	TYPE OR PRINT NOTICE: Fill out completely and return to Cons. Div. office within 30 days.			WELL NUM	WELL NUMBER # 2-13		
	. and				994	Ft. from S	Section Line	
•							Section Line	
LEASE OPERATOR ARGENT ENERGY, INC.							. 18 (E) or 10	
ADDRESS 110 S. MAIN SUITE 810 WICHITA, KS. 67520					_	ROOKS		
PHONE 8 (316) 262-5/11 OPERATORS LICENSE NO. 30219					Date Wel	I Completed	NIA	
Cherecter of Well OTL					Plugging	Commenced	4-4-94	
Oll Gas, D&A, SWD, Input, Water Supply Well)							4-4-94	
The plugging propos	sal was approved o	on <u>o</u>	2-2	5-94			(data)	
OY CARL G	100 DROW				(KCC	District A	gent's Name).	
s ACO-1 filed?		is well i				, 013111C1 A	geni's Mame).	
Producing Formation	ARBUCKLE.	Denth	to To	,, ,335	70'	- 3353'+	23631	
show depth and thic						m <u>0000</u> 1.	0. 0000	
•		1	. g				_	
					CASING RECOR	RD		
Formetion ArbuckLE	Content	From 33570'	53	Size	Put In 3349'	Pulled out		
						70000		
•		_						
•	-				-			
Describe in detail	the manner in wh	ch the we	II w	as plugge	d, Indicat	ng where th	e mud fluid wa	
were used, state	the character o	f 6200	roqu	CING IT	into the hol	le. If cemen	it or other plug	
235 sacks (50) Alutin 500	40 pos 1000 a	nd 350'	hu	els da	un 512"	maximus	a pressure 900	
(lf add	Itlonal descripti	on le noce						
Name of Plugging C	< . //		-	y, use B	AUK OF THIS	torm.)		
			<u>/C.</u>			License No	4072	
Address <u>P.O. Box.</u>			5. <i>4</i>	7560)	O'ATE (PRO A	
NAME OF PARTY RESP	ONSIBLE FOR PLUGG	ING FEES:	AR	GENT 1	ENERGY,	Inc. 14	PRO	
STATE OF KANSAS	<u> </u>	OUNTY OF 5	$S\epsilon$	DGWI	CK 1	.ss. Cono	1-5-01	
JEFF 1	Base					Wiel	VATION DIVISION	
above-described we	ll, being first d	uly sworn	on o	ath. sav	(Employee o s: That I h	eve knowled	'orkanoperator) (
the same are true	matters herein co and correct, so h	ntained a	nd th	• log of	the above-	described w	all as filed the	
TAMMY D. I	THE PERSON AND PERSONS ASSESSMENT OF THE PERSON ASSESSMENT OF THE PERSO			Signatur	ot 37		<u> </u>	
NOTARY PU		(Address) PO. BOX 346 NESS CITY, KS. UTSO						
STATE OF KA	NSAS UBSCRIBED AND SWO	RN TO haf			4	Nacil	0/1	
The state of the s	CONTRACTOR	IV DUIT	۱۱ ۱ ۱ ا	<u></u>		Spill	.19 99	
		. :	15-	10m		ary Public		
,	ly Commission Expl	res:	1d-	<u> dlo-4</u>	4	. ,		