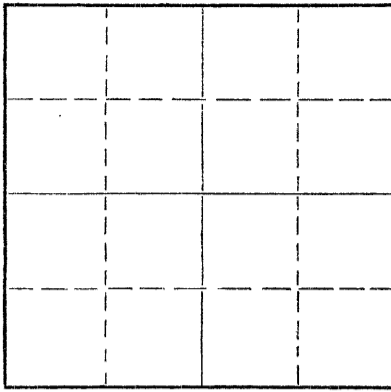


Give All Information Completely
Make Required Affidavit
Mail or Deliver Report to:
Conservation Division
State Corporation Commission
212 North Market, Insurance Bldg.
Wichita, Kansas

WELL PLUGGING RECORD

NORTH



Locate well correctly on above
Section Plat

Thomas County, Sec. 17 Twp. 7S Rge. (E) 32 (W)
Location as "NE/CNW/SW" or footage from lines C SW SW
Lease Owner JOHN O. FARMER, INC.
Lease Name ANDERSON "B" Well No. 1
Office Address Russell, Kansas
Character of Well (completed as Oil, Gas or Dry Hole) Dry
Date well completed 10/6 1959
Application for plugging filed 10/6 1959
Application for plugging approved 10/6 1959
Plugging commenced 10/6 1959
Plugging completed 10/6 1959
Reason for abandonment of well or producing formation Dry

If a producing well is abandoned, date of last production 19
Was permission obtained from the Conservation Division or its agents before plugging was commenced? yes

Name of Conservation Agent who supervised plugging of this well Mr. Fabricius, Hill City, Kansas
Producing formation _____ Depth to top _____ Bottom _____ Total Depth of Well 4705 Feet
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"	214*	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 plugs were used, state the character of same and depth placed, from _____ feet to _____ feet for each plug set.

First plug set at 550 feet with 20 sacks cement

Second plug set at 240 feet with 20 sacks cement

Third plug set at 40 feet with 10 sacks cement and 1/2 sack hulls

RECEIVED
STATE CORPORATION COMMISSION

OCT 19 1959
OCT 19 1959
CONSERVATION DIVISION
Wichita, Kansas

(If additional description is necessary, use BACK of this sheet)
Name of Plugging Contractor JOHN O. FARMER, INC.
Address Russell, Kansas

STATE OF Kansas, COUNTY OF Russell, ss.
I, JOHN O. FARMER (employee of owner) or (owner or operator) of the 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 and that the same are true and correct. So help me God.

(Signature)

John O. Farmer

Russell, Kansas
(Address)

SUBSCRIBED AND SWORN TO before me this 12th day of October, 1959

My commission expires October 11, 1962

Lucille Kennedy
Lucille Kennedy

Notary Public.



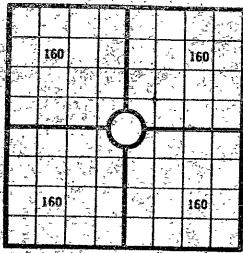
OPERATOR JOHN O. FARMER, INC.

FORMATION RECORD

ADDRESS Russell, Kansas

Give detailed description and thickness of all formation drilled through, contents of sand, whether dry, water, oil or gas.

640 Acres
N



Locate well correctly.

COUNTY Thomas, SEC 17, TWP 7S, RGE 32W
 COMPANY OPERATING JOHN O. FARMER, INC.
 OFFICE ADDRESS Russell, Kansas
 DRILLING STARTED 9/21, 19 59 DRILLING FINISHED 10/6, 19 59
 DATE OF FIRST PRODUCTION _____ COMPLETED _____
 WELL LOCATED C $\frac{1}{4}$ SW $\frac{1}{4}$ SW $\frac{1}{4}$ _____, North of South
 Line and _____ ft. East of West Line of Quarter Section
 Elevation (Relative to sea level), DERRICK FLOOR 3045 GROUND, 3042
 CHARACTER OF WELL (Oil, gas or dryhole) Dry

OIL OR GAS SANDS OR ZONES

Name	From	To	Name	From	To
1			4		
2			5		
3			6		

Perforating Record If Any

Shot Record

Formation	From	To	No. of Shots	Formation	From	To	Size of Shot

CASING RECORD

Amount Set							Amount Pulled			Packer Record	
Size	Wt.	Thds.	Make	Ft.	In.	Ft.	In.	Size	Length	Depth Set	Make
8-5/8				214							

Liner Record: Amount _____ Kind _____ Top _____ Bottom _____

CEMENTING AND MUDDING

Size	Amount Set	Sacks	Chemical		Method of		Amount	Mudding	Results
Size	Ft.	In.	Gal.	Make	Cementing	Amount	Method	(See Note)	
8-5/8	214	125							

Note: What method was used to protect sands if outer strings were pulled?

NOTE: Were bottom hole plugs used? If so, state kind, depth set and results obtained.

TOOLS USED

Rotary Tools were used from _____ feet to _____ feet to _____ feet, and from _____ feet to _____ feet, and from _____ feet to _____ feet.

Type Rig _____

INITIAL PRODUCTION TEST

Describe initial test: whether by flow through tubing or casing or by pumping _____

Amount of Oil Production _____ bbls. Size of choke, if any _____ Length of test _____ Water Production _____ bbls. Gravity of oil _____ Type of Pump if pump is used, describe _____

I, the undersigned, being first duly sworn upon oath, state that this well record is true, correct and complete according to the records of this office and to the best of my knowledge and belief.

John O. Farmer
 Name and title of representative of company

Subscribed and sworn to before me this 12th day of October, 19 59

My Commission expires 10/11/62

Luella Kennedy
 Notary Public.

15-193-3001a-00-00
 FARM NAME ANDERSON "B"
 COUNTY Thomas
 SEC 17
 TWP 7S
 RGE 32W