in profession STATE OF KANSAS STATE CORPORATION COMMISSION 200 Colorado Derby Building Wighita, Kansas 67202

15-065-03081 - 00 - Well was completed on: WELL PLUGGING RECORD K.A.R.-82-3-117

API	NUMBER_	3-30-59	
LEAS	F NAME	Fabricius	Unit

TYPE OR PRINT NOTICE: Fill out completely and return to Cons. Div. WELL NUMBER _____ 502W 660 Ft. from S Section Line

	and letter in to come and							
	•	office within 30 days.			4620 Ft. from E Section Line			
EASE OPERATOR OXY USA Inc.					SEC. 24 TWP. 75 RGE. 23 () or (W)			
DDRESS 3545 N.W. 58th Street, Oklahoma City, OK 73112					COUNTY	Graham		
PHONE # (405) 949-4268 OPERATORS LICENSE NO						II Completed	3-30-59	
					Pluggin	g Commenced	4-18 -88	
naracter of Well <u>Inj.</u> Oil, Gas, D&A, SWD, input, Water Supply Well)						g Completed		
Oll, Gas, D&A,	SWD, input, Water	Supply Wel		10				
ne plugging pro	oposal was approved	on	Mar	ch 7, 198	38		(date)	
v District #4:	Mr. Carl Goodrow				(KC	C District A	gent's Name).	
	TI was completed on: 3-30-59			ttachad?	yes			
s ACO-1 filed?	011. 3-30-39 11 1101	, 15 40	. • •	3683		3687	2740	
roducing Forma	tion <u>LKC</u>	Depth	to To	р <u>3689</u>	Bott	om <u>3698</u> T.	D. <u>3/40</u>	
	thickness of all wa							
					ASING RECO	RD		
OIL, GAS OR WA	TER RECORDS							
Formation	Content	From	То	Size	Put in	Pulled out		
LKC	Inj.	3683	3687	8-5/8"	226 3740			
LNU		3689	3698	5-1/2"	3740	-		
			-		.			
escribe in det	all the manner in t	which the w	011 W	as plugge	d, indicat	ing where th	e mud fluid w	
placed and the	method or methods	used in in	Trodu	cing it i	nio ine no	feet to	feet each so	
Onto the 8-5/8 State Witness:	and filled to su "csg. and pumped "Mr. Carl Goodrow additional descripe Goodractor Ha	SS CX HU	L CIUL-					
(f	additional descrip	tion is nec	essar	y, use BA	CK of this	s formstate con	RECEIVED	
Name of Pluggin	g Contractor Ha	lliburton	Servi	ce Co.		_License No	TORATION COMMISSION	
						MAN		
Address <u>Oberlir</u>	1, KS 6//49			044	HCA Inc		51 1988	
NAME OF PARTY R	ESPONSIBLE FOR PLU	GGING FEES:	:	UXT	USA Inc.	CONCE		
STATE OF Oklai	noma	COUNTY OF	0	klahoma_		,ss. Wichia	ATION DIVISION or (Operator)	
Bryan Humphi	ries	·		((Employee	of Operator)	or (Operator)	
above-described statements, ar	ries well, being first nd matters herein	duly swort	n on o	ath, says	the above	-described w	ell as filed t	
the same are tr	ue and correct, so	help me G	90.	Signatur	Bru	nd then	hr	
. 1			•	Address)	3545 N.W.	58th St (7311. Okla. City, OK	
							,19 88	
	SUBSCRIBED AND S	WORN TO be	fore m	o this 2	5th day	of May	· · · · · · · · · · · · · · · · · · ·	

4-1-92

My Commission Expires:

Notary Public