

15-133-01188-0000

To:

STATE CORPORATION COMMISSION

Wichita State Office Bldg. - PLUGGING SECTION

130 S. Market, Room 2078

Wichita, Kansas 67202

TECHNICIAN'S PLUGGING REPORT

Operator License # 101Operator: STATE OF KANSAS

Name & _____

Address _____

AB oil well XXXXXX Gas Well _____ SWD Well/ Input Well _____

Other well as hereinafter indicated: _____

Plugging Contractor: K-W OIL WELL SERVICE, INCLic. # 3097Address: 19450 FORD ROAD CHANUTE, KSCompany to plug at: Hour: _____ Day: 30 Month: 12 2005Plugging proposal received from: JIM KEPLEYCompany Name: K-W OIL WELL SERVICEPhone: 620-431-2285

Were: _____

Plugging Proposal Received by:

RUSSELL HINE

Plugging attended by Agent: All _____ Part _____

TECHNICIAN

None XXXXXOperations Completed: Hour: _____ Day: 30 Month: 12 2005Actual Plugging Report: WASHED 1" TO 550' INSIDE OF 4". WASHED 500' OUTSIDE OF 4CIRCULATED CEMENT TO SURFACE.143 SACKS OF PORTLAND USEDRemarks: CONTROL # 20050044-022(If additional description is necessary, use BACK of this form.)I ☐ DID NOT observe this plugging.

RECEIVED

JAN 17 2006

KCC WICHITA

Signed:

Russell Hine
TECHNICIAN