## STATE OF KANSAS STATE CORPORATION COMMISSION

Give All Information Completely
Make Required Affidavit
Mail or Deliver Report to:
Conservation Division
State Corporation Commission

## 15-141-00047-00-00

## WELL PLUGGING RECORD

State Corporation Commission 211 No. Broadway Wichita Kangas	0sł	orne	Count	v. Sec. 14 1	wp. 10 Ree 1	L5 (Æ) X (W)
Wichita, Kansas NORTH	Location as "l	NE/CNW4SW4"	or footage fro	m lines NE	NE SW	
	Lease Owner_	Jones,	Shelburn	e & Farmer	, Inc.	
	Lease Name_		nberg	A	)	Well No. #
		370 West				ISAS
		Well (completed				-12 19 57
		r plugging filed_			-	-12 19 57
		r plugging med_ r plugging appro				-12 <u>19 57</u>
		menced				-12 <sub>19</sub> 57
	1 00 0	pleted			_	-12 19 <u>57</u>
	Reason for ab	andonment of we	l or producing	g formation	Dry Hole	
	If a producing	g well is abandor	ed, date of la	st production_		19
Locate well correctly on above	_	~ ~	the Conserv	ation Division o	or its agents befo	re plugging was com-
Section Plat	menced?	Yes M	llton Col	*****		######################################
Name of Conservation Agent who su	pervised plugging of t	his well PL	LTOOL GOT	yaruu	m . 1 p . 1 . C .	3655
roducing formation			Botton	1	Total Depth of	Well 3055 Feet
how depth and thickness of all wat	er, on and gas formati	ons.				
OIL, GAS OR WATER RECO	RDS				C	CASING RECORD
FORMATION	CONTENT	FROM	то	SIZE	PUT IN	PULLED OUT
				8 5/8	294	None
						210110
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	**************************************					
The second secon						
			1			
Name of Plugging ContractorJ	(If addition ones, Shelburn	nal description is nece	ssary, use BACK	of this sheet)		
Address	Russell, R	(ansas	1110			-
STATE OF Kansas	, CC					
John O. Fa		(	employee of	owner) or (own	ner or operator) o	of the above-described
well, being first duly sworn on oath	, says: That I have I	knowledge of the	facts, statem	ents, and matte	rs herein contain	ed and the log of the
above-described well as filed and th	at the same are true	and correct. So	help me God.	In 2		
		(Signature)	10M	UV. H	Muer	
r production of the second of		,	7270 Ma	ct Wahita	Arrowso Pr	ranali Vanasa
		1	1 210 ME	<u>st wichite</u>	Address)	ussell, Kansas
Subscribed and Sworn to be	fore me this 13t	day of	Septe	mber		<u>57</u>
					El Half	
./ -	10/1			Jowe	or your	Notary Public.
My commission expires 4-5-	196/			U	Inches &	The second secon
		The state of the s	·		I PL	_UGGING
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				9-10	BOOK? P	AGE 15 LINE 3:
				77-	77	LINE 9 X

NOVEMBER

	UPI	ERATOR	.v.ucb	Y C. C.	<u> </u>	e raril	er, 1	₩C*
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		Elevation (						
Locate well	correctly		OF WELL					
		Oli. O	R GAS SAN	DS OR 70N	ES.	Salar F	1	er er
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A principle of the second seco	ميكسفين الاستس	cord If Any			Si	ot Record		
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5/8 294  Note: What meti	nod was us			3-2-6				1, 4
Size Ft. [ 3 5/8 294	nod was us			3-2-6			obtained	<u></u>
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Note: What meth	nod wäs us om hole plu	gs used?	If so, st	ate kind, de SED	epth set c	and results	feet t	6 2 45
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Note: What meth	nod was us om hole plu used from	rgs. used?  feet to	If so, st	ate kind, de SED ble toals w — feet, an	epth set c	and results	feet t	

bbls. Size of choke, if any.

Type of Pump if pump is used, describe

bbls. Gravity of oil

Amount of Oil Production.

Production.

Shale 90 295 460 525 460 525 5606 5hale Pyrite 608 615 712 745 5hale and Sand 712 745 5hale & Sand 745 895 1153 1193 1750 11me & Shale 1750 3519 Conglomerate 3519 3535 11me & Shale 3635 3647 3655 TOPS:  Total Depth 3655 Elevation 1945 R.B. Anhydrite 1153 1193 1750 11me & Shale 3646 Total Depth 3655 D. & A.	Formation	Top	Bottom	Formation	Тор	Botton
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## ## ## ## ## ## ## ## ## ## ## ## ##	<b>S</b> hale	<b>0</b>	295			
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Shale & Pyrite   606   615   712   745   846   712   745   895   895   866   895   866   895   866   8		460	525			1.
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Lime & Shale   1750   3519   3535   3647   3655   TOPS:     TOPS:     Total Depth   3655   Elevation   1945   R.B.   Anhydrite   1153   Heebner   3086   Lansing   3136   B.K.C.   3406   Cong. Sand   3518   Cherty Cong.   3536   Simpson   3611   Arbuckle   3646   Total Depth   3655       Total Depth   3655     Total Dept	Shale & Shells	1193	1750			j@arr.
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<sup>1,</sup> the undersigned, being first duly sworn upon oath, style 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.

Name and title of representative of company

Subscribed and sworn to before me this 16th

My Commission expires

September

Notary Public.