STATE OF KANSAS STATE CORPORATION COMMISSION 130 S. Mårket, Room 2078 Wichita, KS 67202

My Commission Expires:____

WELL PLUGGING RECORD K.A.R.-82-3-117

API	NUMBER_	15-	163	-22	282	-00	-00
			A				

TYPE OR PRINT

NOTICE: Fill out completely and return

LEASE NAME Deveny No. 2 WELL NUMBER__

	to Cons. D	iv. office with	nin 30 days.	1320 Ft. 1	from(S)N Line of Sec	tion (circle one)
(Fayman	ly drilled by S &	K Oil Co)		<u>2310</u> Ft.	from E/W Line of Sec	tion (circle one)
rormer). EASE OPERATOR <u>Liberty O</u>		SPOT LOCATION <u>C - W/2 - W/2 - SE</u>				
ADDRESS 308 W. Mill				25 TWP	9s s. RGE 18W	(() or (())
CITY, STATE, ZIP <u>Plainv</u>				TY_Rooks		
PHONE#(913)_434-4686_ C				Well Completed	2/84	
Charater of Well <u>T.A.C</u> (Oil, Gas, D				Plugging Comme	nced <u>11/8/96</u>	
(Oil, Gas, D	D&A, SWD, Input, Water St	upply Well)	Date	Plugging Compl	eted <u>11/8/96</u>	
The plugging proposal was ap	oproved on <u>Fmergency</u>	plugging a	uthorizatio	on by Carl G	Goodrow 11/8/96	(date)
y <u>while rig was or</u>	hole.		and the second of the second o		(KCC Dist	rict Agent's Name)
Is ACO-1 filed? <u>yes</u> Producing Formation(s) <u>l</u> s	If not, is well log at	tached? <u>yes</u>				
Producing Formation(s)	sg. K.C.		Depth 1	to Top <u>3330</u>	Bottom 3554	T.D
Show depth and thickness of						
OIL, GAS OR WATER RECORDS					CASIN	G RECORD
FORMATION	CONTENT	FROM	то	SIZE	PUT IN	PULL OUT
anhydrite	limestone	1464'	1495'	8 5/8"	2081	none
Topeka	limestone	3072	3288	4½	3617	none
Lsg. K.C.	shale & limeston	e 3330	3554			
					9 4	
Described in detail the man used in introducing it into 1950 feet to Surfacer Spot 100 sx thru 80 sx, pressure to	the hole. If cement or eet each set. tubing @ 1950* (60 1000# instant shu	other plugs we /40 poz 10% t in 700#.	gel) Pull Mix 25 sx	ed tubing s	queezed from si ulus thru brad	urface with
500# shut in pressu	ure. (used 205 sx	60/40 poz 1	<u>10% gel 800</u>	# cotton se	ed hulls)	
Name of Plugging Contractor License No. NA Address Russell, Ks.			ecessary, use <u>l</u>	BACK of this for	m.)	
NAME OF PARTY RESPONDIBLE F	Pook			o de la composition de la Comp		
STATE OF	COUNTY OF			,ss.		
Charles D. Farr					of above-described	
sworn on oath, says: That well as filed that the same	I have knowledge of the are true and correct, s	facts, statemen to help me God.	its, and matters		AND THE PARTY OF T	le above-described
(Signature harli	D. Farr			NOTARY PUBLIC - SANDRA	A CHARD	
(Address)				innimi Mà Abhr Exh.	and the second of the second o	
SUBSCRIBED AND SWORN TO	D before me this	_ day of <u>No</u>	vember	_, 19 <u>96</u>		
	<u>,</u>	Motary Pub	<u>card</u>			
	~ l /	HULAI Y PUD				

Form CP-4 Revised 12-92