STAT	E OF	KANS	AS		
STAT	E COF	RPORA	TION	COMMI	SSION
200	Color	ado	Derby	Buil	ding
Wich	ita,	Kans	as 6	7202	

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

API NUMBER	15-163-22,855 -00-0C
LEASE NAME	

TYPE OR PRINT					
NOTICE: Fill out completely					
and return to	Cons. Div.				
office within	30 days.				

LEASE NAI	۳ ـ				
WELL NUM	BER _	1			·
780	Ft.	from	s	Section	Line

office within 30 days.		
	4620 Ft. from E	Section Line
LEASE OPERATOR Abercrombie Drilling, Inc.	SEC. 17 TWP. 85 RGE.	19W (E)or(W)
ADDRESS 801 Union Center, Wichita, KS 67202	COUNTY Rooks	
PHONE#(316) 262-1841 OPERATORS LICENSE NO. 5422	Date Well Completed _	1/07/86
Character of Well <u>DRY</u>	Plugging Commenced	1/07/86
(Oil, Gas, D&A, SWD, Input, Water Supply Well)	Plugging Completed	1/07/86
Did you notify the KCC/KDHE Joint District Office prior to	plugging this well?	YES
Which KCC/KDHE Joint Office did you notify?	Carl Goodrow	
Is ACO-1 filed? YES If not, is well log attached?		

Producing Formation _____ Depth to Top ____ Bottom ______ T.D. 3450'

Show depth and thickness of all water, oil and gas formations.

OIL, GAS OR WA		CASING RECORD				
Formation	Content	From	То	Size	Put in	Pulled out
				-		
Describe in det	l aid the manner in	lwhich the w	_l vell w	as plugge	_l	ting where the mud fluid

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 each set.

1st plug	@ 1425'/25 sx.	3rd plug @ 270'/	10 cv	Diag dorm 2.20	
				Plug down 2:30	р.ш.,
	@ 700'/100 sx.			1/07/86.	
<u>l sx. Hu</u>	1,1,s,	15 sx /Rathole	60-40 poz., 2% gel, sary, use BACK of thi	3% c.c.	
· ·	(IT additional des	cription is necess	sary, use <u>BACK</u> of thi	s form.)	
Name of Plu	ugging Contractor	Abercrombie Dril	ling, Inc.	_License No	5422
Address	801 Union Center,	Wichita, KS 67202			
STATE OF	Kansas	COUNTY OF	Sedqwick		

Jack L. Partridge, Vice President

(Employee of Operator) or (Operator) of 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 that the same are true and correct, so help me God.

(Address) 801 Union Center, Wichita, KS 67202

SUBSCRIBED AND SWORN TO before me this 16th day of January ,19 86

My Commission Expires: 7-13-89

JAN 25 1980 23 -86 Revised