STATE OF KANSAS STATE CORPORATION COMMISSION

15-163 - 04207 - 00-00 WELL PLUGGING RECORD

or

Strike out upper line when reporting plugging off formations.

Give All Information Completely Make Required Affidavit Mail or Deliver Report to: Conservation Division State Corporation Commission 800 Bitting Building Wichita Kansas

FORMATION	PLUGGING	RECORD
T. OTATATE TEOTA	THUUUUIIVG	mccomb

Wichita, Kansas		oks		ounty, Sec. 25	Two los Re	<u>18W</u> (E)(W)
NORTH	Location as "I	JE1/NW1/SW1/:	on footome f	Trans lines NT	H NINE CITE	
	T Lease Owner	Contine	ental Oil	. Co.		
	Office Address	Ponca C:	ity, Okla	homa		wen no
	Character of V	${ m Vell}$ (completed i	as Oil, Gas or	Dry Hole) St	ratigraphic	Test
.	Date well com	pleted		N	larch 29.	1943
	Application fo	r plugging filed		N	arch 29	1943
	Application fo	r plugging appro	ved	M	arch 29	10/13
	Plugging comr	Application for plugging approved		N.F	orch 20	19\t\ldots
	Plugging comp	Plugging completed			arch 30	19#.Q
	Reason for ab	Reason for abandonment of well or producing formation.			Stratigraph	ic Test
	1 ,					
	If a producing	well is abandone	d date of la	et production		19
	Was permission	n obtained from	the Conserve	st production	:+	e plugging was com-
Locate well correctly on above Section Plat	menced?	Yes				
ame of Conservation Agent who superedvoing formation	ervised plugging of t	his wall	C. T. Al	exander		
roducing formation	Don	th to ton				7.00
now depth and thickness of all water,	oil and gas formation	na to top	Во	ttom	Total Depth of	Well 3650 Feet
OIL, GAS OR WATER RECORD		ns.				
					C.	ASING RECORD
Formation	Content	From	To	Size	Put In	Pulled Out
				8 5/8"	104 ft.	
			1			none

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top.				APT 14 04-14-1	94,-	7
				Y	73	
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		18W)				
	25 / 0					
<u> </u>	<u> </u>	42				
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Correspondence regarding this well	tradditional de	scription is necessary,	use BACK of th	nis sheet)		
Correspondence regarding this well lress Box 6 Plair	wille Kongo	uu.eueOr	Re vrein			
		har				
Tr						
TE OF Kansas	COUNTY	OF Rook	S	gg		The second secon
o. denige vie	L.L.L	(emn	over of over	m) on (or	perator) of the al-	ove-described well,
g first duly sworn on oath, says: Th	at I nave knowledge	e of the facts, sta	tements and	matters herein	contained and +L-	log of the -
ribed well as filed and that the same	are true and correct	t. So help me G	oda -	THE STATE OF THE PARTY OF THE P	, /	nog of the above-
			11 / Bo		m//	•
		(Signature)	1. 1.	longe	1/1/10	2
			7	7-2-2-2-	1	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	/ 6 .	<i></i>		lainville,	Kansas	
Subscribed and Sworn to before me	this oth	day of	I ps:	(Add	ress)).
302020 mc		uay or	1-100	<u>'</u>	, 19. 7. 3	7 0
ommission expires			,	Year.	, A	o e d
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