

KANSAS
STATE CORPORATION COMMISSION

WELL PLUGGING SUPERVISOR'S REPORT

Handwritten mark

TO:
Jewel M. Ogden, Director
500 Insurance Building
212 North Market
Wichita 2, Kansas

File No. _____ Location: NE NE SE
County: Graham Sec. 24 Twp. 9 Rge. 22 (E) (W)
Name of Field or Pool: _____ Total Depth: 3947

I have this date completed supervision of plugging of:

Well No. #1 Lease KERN

Operator's Full Name STERLING DRUG CO.

Complete Address: Box 127. STERLING KANS.

Plugging Contractor: Same

Address: _____ License No. _____

Abandoned Oil Well _____ Gas Well _____ Input Well _____ SWD Well _____ D & A

If well is a rotary drilled dry hole did operators wait for you to arrive No.

If yes how long _____ Reason: _____

Operation Completed: Hour 4 PM Day 1 Month FEB Year 1958

The above well was plugged as follows:

Mudded BACK to 700' Bridged & plugged with 20 SX
CEMENT - Mudded BACK To 180' Bridged & plugged
with 15 SX CEMENT Mudded BACK to 40' Bridged
& plugged with 10 SX CEMENT TO BASE OF CELLAR.
200' OF 8 1/2" SURFACE.

I hereby certify that the above well was plugged as herein stated and that I was present while the above well was being plugged.

Signed: A. D. Fabian
Well Plugging Supervisor

I hereby state that I was not present while the above well was being plugged, however, to the best of my knowledge and belief it was plugged as herein stated. A full account for my not being present is as follows:

2/5/58

Director

Reviewed: J. Lewis Brock
Field Supervisor

Signed: _____
Well Plugging Supervisor

Remarks:

PLUGGING
FC 24T 9 R 224
BOOK PAGE 00 LINE 38