STATE OF KANSAS STATE CORPORATION COMMISSION 200 Colorado Derby Bulldiag

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

API NUMBER 15-065-22,250 -00-0

200 COTOL GOO DOLDY DELIGING	
Wichita, Kansas 67202	LEASE NAME Quint
TYPE OR PRINT NOTICE: FILL out compl	WELL NUMBER 2
and return to Cons.	Div. 330 5+ 4
office within 30 da	2970 Ft. from E Section Line
LEASE OPERATOR Champion Petroleum, Incoporated	SEC. 17 TWP. 8 RGE. 22 (X) or (W)
ADDRESS P.O. Box 340, Great Bend, Kansas 675	30 COUNTY Graham
PHONE#(316 <u>792-1314</u> OPERATORS LICENSE NO. <u>9265</u>	
Character of WellD&A	Plugging Commenced 10-19-85
(Oil, Gas, D&A, SWD, Input, Water Supply Well)	Plugging Completed 10-19-85
Did you notify the KCC/KDHE Joint District Office pri	or to plugging this well? Voc
Which KCC/KDHE Joint Office did you notify?Dist	#6
Is ACO-1 filed? If not, is well log attack	ned?
Producing Formation Depth to Top	Botton
Show depth and thickness of all water, oil and gas for	1.D.38281
OIL, GAS OR WATER RECORDS	
Formation	CASING RECORD
Content From To Size	Put in Pulled out
Surf. 259' 8-5	5/8"
Describe in detail the manner in which the well was placed and the method or methods used in introducing i	
placed and the method or methods used in introducing i were used, state the character of same and depth place	ugged, indicating where the mud fluid wa: t into the hole, if coment on att
$\frac{25 \text{ SX}}{2}$ 9 3/20', 25 SX 8 1780! 100 6 or	d, from feet to feet each set.
@ 40', 10 sx. in rathole 60/40 Pozmix, 6% Gel	0', 50 sx. @ 270', 10 sx.
(If additional description is necessary, use	BACK of this form.)
Name of Plugging Contractor Woodman Iannitti Drlg.	
Address P.O. Box 308, Great Bend, Kansas 67530	Co. License No. 5122
STATE OF James COUNTY OF Bart	
Todd E. Morganstorn	,ss.
above-described well being ((Employee of Operator) or (Operator) of
statements, and matters herein contained and the log of the same are true and correct, so help me God.	the above-described well as filed that
	ure Jodd & Morgantin
(Addres	
SUBSCRIBED AND SWORN TO before me this	70 1- (4)
ma	19 85
My Commission Expires: 3-2/-87	Notary Public Notary Public
STATE COMPLICATION COMMISSION STATE COMPLICATION ST	/
MOV 2 4 1983	Form CP-4

Form CP-4 Revised 08-84