

15-065-00524-0000

KANSAS
STATE CORPORATION COMMISSION

WELL PLUGGING SUPERVISOR'S REPORT

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

File No. _____ Location: SE SW SW

County: Graham Sec. 23 Twp. 8 Rge. 23 (E) (W)

Name of Field or Pool: _____ Total Depth: 3795

I have this date completed supervision of plugging of:

Well No. #1 Lease Hull

Operator's Full Name MURFIN-RAINS + Williamson

Complete Address: 617 UNION CENTER, WICHITA, KS.

Plugging Contractor: S ZMF

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 5 AM. Day 16 Month APRIL Year 1958

The above well was plugged as follows:

Mudded BACK to 600' Bridged & plugged with 25 SX CEMENT - Mudded BACK to 200' Bridged & plugged with 15 SX CEMENT - Mudded BACK to 40' Bridged & plugged with 10 SX CEMENT to BASE OF CELLOR. 201' of 8 5/8 SURFACE CASING.

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. Johnson
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:

RECEIVED
STATE CORPORATION COMMISSION

4/18/58
APR 18 1958

CONSERVATION DIVISION
Wichita, Kansas

Reviewed: J. Lewis Brock
Field Supervisor

Signed: _____
Well Plugging Supervisor

Remarks:

PLUGGING
FILE SEC 23 T 8 R 23W
BOOK PAGE 94 LINE 14