

KANSAS
STATE CORPORATION COMMISSION

WELL PLUGGING SUPERVISOR'S REPORT

R

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

15-065-00537-00-00

File No. _____ Location: NE NE SW

County: Graham Sec. 28 Twp. 8 Rge. 23 (E) (W)

Name of Field or Pool: _____ Total Depth: 3930

I have this date completed supervision of plugging of:

Well No. #1 Lease BLACKFORD

Operator's Full Name BURCH DRILLING Co, INC.

Complete Address: 1011 UNION CENTER, WICHITA, KANS.

Plugging Contractor: Some

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 12PM Day 12 Month FEB Year 58

The above well was plugged as follows:

Mudded BACK TO 600' - Bridged & plugged with
25 SX CEMENT - Mudded BACK TO 225' Bridged
& plugged with 15 SX CEMENT - Mudded BACK TO
40' Bridged & plugged with 10 SX CEMENT TO
BASE OF CELLAR. 225' 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. 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:

8-25-58

RECEIVED
STATE CORPORATION COMMISSION

Reviewed: J. Lewis Brock
Field Supervisor

Signed: _____
Well Plugging Supervisor

Remarks:

PLUGGING
FILE SEC 28 T. 8 R. 23
BOOK PAGE 85 LINE 13

WICHITA, KANS.