

15-179-20059-00-40

STATE OF KANSAS  
STATE CORPORATION COMMISSION  
200 Colorado Derby Building  
Wichita, Kansas 67202

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

API NUMBER 11-22-67

LEASE NAME Zeigler

WELL NUMBER 3

4620 Ft. from S Section Line

1980 Ft. from E Section Line

SEC. 30 TWP. 8 RGE. 26 (E or W)

COUNTY Sheridan

Date Well Completed 11-22-67

Plugging Commenced 2-19-91

Plugging Completed 2-19-91

RECEIVED  
STATE CORPORATION COMMISSION  
2-21-1991  
FEB 21 1991

TYPE OR PRINT  
NOTICE: Fill out completely  
and return to Cons. Div.  
office within 30 days.

CONSTRUCTION DIVISION

LEASE OPERATOR Dreiling Oil, Inc.

ADDRESS Box 1000, Victoria, KS 67671

PHONE# (913) 735-2204 OPERATORS LICENSE NO. 5145

Character of Well \_\_\_\_\_

Oil, Gas, D&A, SWD, Input, Water Supply Well

The plugging proposal was approved on 12-27-90 (date)

by Carl Goodrow (KCC District Agent's Name).

Is ACO-1 filed? \_\_\_\_\_ If not, is well log attached? \_\_\_\_\_

Producing Formation \_\_\_\_\_ Depth to Top \_\_\_\_\_ Bottom \_\_\_\_\_ T.D. \_\_\_\_\_

Show depth and thickness of all water, oil and gas formations.

OIL, GAS OR WATER RECORDS | CASING RECORD

Formation	Content	From	To	Size	Put In	Pulled out
	Surface			8 5/8"	140	0
	Casing			4 1/2"	3944	0

Describe in detail the manner in which the well was plugged, indicating where the mud fluid was placed and the method or methods used in introducing it into the hole. If cement or other plugs were used, state the character of same and depth placed, from \_\_\_\_\_ feet to \_\_\_\_\_ feet each set.  
4 1/2" plugged with 400# hulls, 250 sks 65/35 Poz 8% Gel. 300 PSI Max 150 Shut in  
8 5/8" plugged with 100 sks 65/35 Poz, 8% Gel 150 PSI Max 150# shut in.  
Plugging completed 1:30 p.m.

(If additional description is necessary, use BACK of this form.)

Name of Plugging Contractor Dreiling Oil, Inc. License No. 730

Address Box 1000, Victoria, KS 67671

NAME OF PARTY RESPONSIBLE FOR PLUGGING FEES: Dreiling Oil, Inc.

STATE OF Kansas COUNTY OF Ellis, ss.

Ivan R. Edsall (Employee of Operator) or (Operator) of above-described well, being first duly sworn on oath, says: That I have knowledge of the facts, statements, and matters herein contained and the log of the above-described well as filed that the same are true and correct, so help me God.

(Signature) Ivan R. Edsall

(Address) Box 1000, Victoria, KS 67671

SUBSCRIBED AND SWORN TO before me this 20th day of February, 19 91

Cecilia Basgall  
Notary Public

My Commission Expires \_\_\_\_\_

