STATE CORPORATION COMMISSION	- u	K.A.R82-3-117				API NUMBER 179-21089 0000 SE NAME Sanger		
130 S. Market, Room 2078	-							
Wichita,* KS 67202		TYPE OR PRINT NOTICE: Fill out completely and return to Cons. Div. office within 30 days.				WELL NUMBER 1		
۶ *	HOTIC							
	of					330 Ft. from S Section Line		
7 0/1 0						_ ft. from E		
LEASE OPERATOR Jason Oil Company					SEC35	SEC. 35 TWP. 85 RGE. 26 NEO or (W)		
ADDRESS P.O. Box 701 Russell, Kansas 67665					COUNTY _	COUNTY Sheridan		
PHONE (913) 483-4204 OPER	ATORS L	ICENSE N	0. <u>662</u>	22	Date We	il Completed 1	/24/97	
Character of Well D&A					Pluggin	Plugging Commenced 7:00AM1/24/97		
(Oll, Gas, D&A, SWD, Input, Water Supply Well)					Plugging	Plugging Completed 10:00AM1/24/97		
The plugging proposal was app	roved o	n 1/23/9	97	- • .	·	and the second s		
by <u>Ken Kuhn</u>					(KC	C District Age	·	
Is ACO-1 filed? Yes I								
Producing Formation None						T 0	2000	
						· U .	, 3900	
Show depth and thickness of a	II WATE	r, oll a	na ga		•			
OIL, GAS OR WATER RECORDS				<u>_</u>	ASING RECO	RO		
Formation Content		From	То	Size	Put In	Pulled	Ş	
		· 0	250	8 5/8	249_61	None	T	
Describe in detail the manner	in whi	ch the w	0 W	as plugge	d. Indicat	TO Where the		
placed and the method or met were used, state the charac	hods us	ed in in	trodu	cing it i	nto the ho	le. If coment	or offer pi	
1st Plug @ 2210' w/25sks 10sk	s In-Moi	use Hole	Circ	ulated 1s	t Plug 15 M	linutes With 4	9 Vis. Mud.	
2nd Plug @ 1320' w/100sks 15sk 3rd Plug @ 300' w/40sks Tota	1.200skg	= 60/40 pc	2 68C	#FC/ س اط	ed with muc	ied Cementing		
Ath Plug a 40' w/10sks Comp	leted @	10:00AM	1/247	97				
Name of Plugging Contractor	Discove	rv Drilli	ina T	nc .	- · · · · ·	License No. 3	1510	
		67601	1197_1	.110 •			1340	
	Kansas		Tagg	n Oil Com				
NAME OF PARTY RESPONSIBLE FOR				,	pany			
		UNTY OF			· · · · · · · · · · · · · · · · · · ·	_, ss.		
Jim Schoenberger d/b/s above-described well, being f	Irst du	IV STOFF	00 0	y (Employee o	f Operator) of	(Operator)	
statements, and matters her the same are true and correct	noo nie	s benist	nd th	e log of	the above-	described yel	l as filed 1	
The same are the and carried.	, 30 NW	. h me Go		Signature	Que	1. Inho	nbegg	
			(Address)	POBOX7	Ol Rossell	156765	
A MARKSARBLEHM	NO SWOR	N TO bef	m ero	e this _\	9th day	of February	,1997	
Notary Public - State of Kensel My Appl. Expires	'	,			7 . 1	Cl T		
USE ONLY ONE SIDE OF F	n Exnle	es: 7/	-	 		ary Public		
USE ONLY ONE SIDE OF F	ACH F	ORIM	· · · · · · ·					

Form CP Revised 05-