

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

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

API NUMBER 15-179-20,942-00-00

LEASE NAME INLOES

WELL NUMBER 1-36

TYPE OR PRINT
NOTICE: Fill out this application
and return to the Conservation
office within 30 days.

RECEIVED
JUN 28 1989
06-28-1989

330' Ft. from S Section Line

330' Ft. from E Section Line

SEC. 36 TWP. 9S RGE. 26W (E) or (W)

COUNTY Sheridan

Date Well Completed _____

Plugging Commenced 11:45 P.M. 5/02

Plugging Completed 7:45 A.M. 5/03/89

LEASE OPERATOR Landmark Oil Exploration, Inc.

ADDRESS 250 N. Water, Suite 308 Wichita, KS. 67202

PHONE# (316) 265-8181 OPERATORS LICENSE NO. 6113

Character of Well D&A

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

Did you notify the KCC/KDHE Joint District Office prior to plugging this well? YES

Which KCC/KDHE Joint Office did you notify? Mr. Baltazor

Is ACO-1 filed? YES 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

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.
Plug @2240' w/25 sk., 1350' w/100 sk., 280' w/40 sk., 40' w/10 sk., 15 sk. RH, 10 sk. MH.
Cement was 60/40 Poz, 2% gel

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

Name of Plugging Contractor Halliburton License No. _____

Address _____

STATE OF _____ COUNTY OF _____ 11 1 2 1989, ss.

Mr. Howard Cain
(Employee of Operator) or (Operator) of above-described well, being first duly sworn on oath, says that he has 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.

X (Signature) Howard Cain

(Address) Box 30, Hayslington, KS 67544

SUBSCRIBED AND SWORN TO before me this 10th day of July, 1989

X Karri Wolken
Notary Public

My Commission Expires: 12-21-1991

