

15-065-20946-00.00

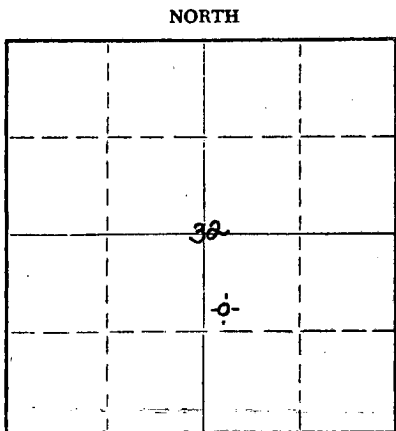
STATE OF KANSAS
STATE CORPORATION COMMISSION

WELL PLUGGING RECORD

Give All Information Completely
Make Required Affidavit
Mail or Deliver Report to:
Conservation Division
State Corporation Commission
212 North Market, Insurance Bldg.
Wichita, Kansas

Graham County, Sec. 32 Twp. 10S Rge. 24W (E) (W)

Location as "NE/CNW/SW" or footage from lines SW NW SE
Lease Owner Associates Oil & Gas, Inc.
Lease Name ROME Well No. 2
Office Address 120 S. Market, Suite 501, Wichita, KS 67202
Character of Well (completed as Oil, Gas or Dry Hole) Dry Hole
Date well completed 8-29-77 19
Application for plugging filed Yes 19
Application for plugging approved 19
Plugging commenced 19
Plugging completed 2:15 A.M., 8-29-77 19
Reason for abandonment of well or producing formation _____



Locate well correctly on above
Section Plat

If a producing well is abandoned, date of last production _____ 19
Was permission obtained from the Conservation Division or its agents before plugging was commenced? Yes

Name of Conservation Agent who supervised plugging of this well Leo Massey
Producing formation _____ Depth to top _____ Bottom _____ Total Depth of Well _____ Feet
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 for each plug set.

Plug #1 900' 70 sx.
Plug #2 356' 20 sx.
Plug #3 40' 10 sx.

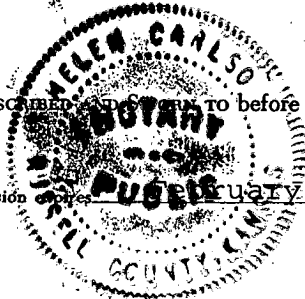
RECEIVED
STATE CORPORATION COMMISSION
9-1-77
SEP 01 1977
CONSERVATION DIVISION
Wichita, Kansas

(If additional description is necessary, use BACK of this sheet)
Name of Plugging Contractor John O. Farmer, Inc.
Address Box 352, Russell, Kansas 67665

STATE OF KANSAS, COUNTY OF RUSSELL, ss.
John O. Farmer (employee of owner) or (owner or operator) of the 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 and that the same are true and correct. So help me God.

(Signature) John O. Farmer
Box 352, Russell, Kansas 67665 (Address)

Subscribed and sworn to before me this 29th day of August 19 77
My commission expires February 15, 1979
Helen Carlson Notary Public.



15-065-20946-00-00

KANSAS DRILLERS LOG

S. 32 T. 10S R. 24W ^E/_W

API No. 15 _____
County _____ Number _____

Loc. SW NW SE

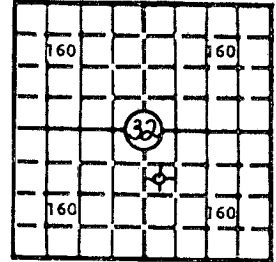
Operator
Associates Oil & Gas, Inc.

County Graham

Address
120 S. Market, Suite 501, Wichita, KS 67202

640 Acres
N

Well No. 2 Lease Name ROME



Footage Location
990 feet from (N) ~~(E)~~ line 330 feet from ~~(E)~~ (W) line

Elev.: Gr. 2418

Principal Contractor John O. Farmer, Inc. Geologist _____

Spud Date 8-19-77 Total Depth 4025' P.B.T.D. _____

Date Completed 8-29-77 Oil Purchaser None -- D & A

DF 2421 KB 2423

CASING RECORD

Report of all strings set — surface, intermediate, production, etc.

Purpose of string	Size hole drilled	Size casing set (in O.D.)	Weight lbs/ft.	Setting depth	Type cement	Sacks	Type and percent additives
Surface	12-1/4	8-5/8	26	217	Common	170	

LINER RECORD

PERFORATION RECORD

Top, ft.	Bottom, ft.	Sacks cement	Shots per ft.	Size & type	Depth interval

TUBING RECORD

Size	Setting depth	Packer set at

ACID, FRACTURE, SHOT, CEMENT SQUEEZE RECORD

Amount and kind of material used	Depth interval treated

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STATE CORPORATION COMMISSION
JAN 27 1978
CONSERVATION DIVISION
Wichita, Kansas

INITIAL PRODUCTION

Date of first production _____	Producing method (flowing, pumping, gas lift, etc.) _____
RATE OF PRODUCTION PER 24 HOURS	Oil _____ Gas _____ Water _____ Gas-oil ratio _____
Disposition of gas (vented, used on lease or sold) _____	Producing interval(s) _____ CFPB _____

INSTRUCTIONS: As provided in KCC Rule 82-2-125, within 90 days after completion of a well, one completed copy of this Drillers Log shall be transmitted to the State Geological Survey of Kansas, 4150 Monroe Street, Wichita, Kansas 67209. Copies of this form are available from the Conservation Division, State Corporation Commission, 3830 So. Meridian (P.O. Box 17027), Wichita, Kansas 66217. Phone AC 316-522-2206. If confidential custody is desired, please note Rule 82-2-125. Drillers Logs will be on an open file in the Oil and Gas Division, State Geological Survey of Kansas, Lawrence, Kansas 66044.

Operator Associates Oil & Gas, Inc.		DESIGNATE TYPE OF COMP.: OIL, GAS, DRY HOLE, SWDW, ETC.:
Well No. 2	Lease Name ROME	Dry Hole
S 32 T 10S R 24W ^E _W		

WELL LOG

Show all important zones of porosity and contents thereof; cored intervals, and all drill-stem tests, including depth interval tested, cushion used, time tool open, flowing and shut-in pressures, and recoveries.

SHOW GEOLOGICAL MARKERS, LOGS RUN, OR OTHER DESCRIPTIVE INFORMATION.

FORMATION DESCRIPTION, CONTENTS, ETC.	TOP	BOTTOM	NAME	DEPTH
Shale	217	900		
Shale & Sand	900	1600		
Sand	1600	1812		
Red Bed	1812	2052		
Anhydrite	2052	2094		
Shale & Shells	2094	2320		
Shale & Lime	2320	3440		
Lime & Shale	3440	3790		
Lime	3790	4025		

USE ADDITIONAL SHEETS, IF NECESSARY, TO COMPLETE WELL RECORD.

Date Received	Signature
	Title
	Date