

15-051-24427-00-00

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

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

API NUMBER 15-051-24,427-00-00

LEASE NAME Chrisler

WELL NUMBER 1-36

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

2310 Ft. from S Section Line

2970 Ft. from E Section Line

SEC. 36 TWP. 11S RGE. 16 ~~W~~ (W)

COUNTY Ellis

Date Well Completed 9-01-86

Plugging Commenced 9-01-86

Plugging Completed 9-01-86

LEASE OPERATOR ALLEN DRILLING COMPANY

ADDRESS P.O. Box 1389, Great Bend, KS

PHONE#(316) 793-3582 OPERATORS LICENSE NO. 5418

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? _____

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
		0	884	8 5/8	877	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.

155 sx 60/40 poz, 3% cc, 1 sx flow seal:
#1 @ 3350 w/25 sx; #2 @ 910 w/25 sx; #3 @ 450 w/80 sx;
#4 @ 40 w/10 sx; #5 in rathole w/15 sx.

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

Name of Plugging Contractor Allen Drilling Co. License No. 5418

Address P.O. Box 1389, Great Bend, KS 67530

STATE OF KS COUNTY OF Barton, ss.

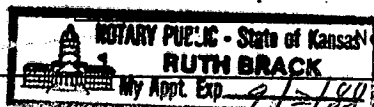
John A. Johnson (Employee of Operator) or (Operator) of above-described well, being first duly sworn on oath, says: That I have knowledge of the facts, statements, and matters herein contained and the log of the above-described well as filed that the same are true and correct, so help me God.

(Signature) [Signature]

(Address) P.O. Box 1389, Great Bend, KS

SUBSCRIBED AND SWORN TO before me this 15th day of Sept., 1986

My Commission Expires: _____



Ruth Brack
Notary Public

9-19-1986
SEP 19 1986 Form CP-4 Revised 08-84