

15-065-20390-0001

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

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

API NUMBER \_\_\_\_\_

LEASE NAME Hoeting

WELL NUMBER 2-4

N/A Ft. from S Section Line

N/A Ft. from E Section Line

SEC. 29 TWP. 9 RGE. 24 (XXX(W))

COUNTY Graham

Date Well Completed N/A

Plugging Commenced 7/11/97

Plugging Completed 7/11/97

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

LEASE OPERATOR Murfin Drilling Company, Inc.

ADDRESS 250 N. Water, Suite 300, Wichita, KS 67202

PHONE# 0131) 421-2103 OPERATORS LICENSE NO. 30606

Character of Well Inj.

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

The plugging proposal was approved on 7/11/97 (date)

by District #4, Hays, KS 67601 (KCC District Agent's Name).

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

Producing Formation LKC Depth to Top 3968 Bottom 4088 T.D. 4160 <sup>RT</sup> <sub>KCC</sub> 4106

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
LKC	Water	3968	4088			
				8 5/8	252	0
				4 1/2	4106	0
					4138 RT KCC	

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.

Perforated 4 1/2 @ 2230' & 1350'. Ran tbg to 3800'. Spotted 15 sacks 60-40 Poz 10% gel, 200# hulls. Pulled tbg 1998'. Spotted 75 sacks 60-40 Poz 10% gel 200# hulls. Pulled tbg 568'. Pumped 35 sacks for cement. Pulled tbg out of hole. Tied out 4 1/2". Pumped 50 sacks 60-40 (If additional description is necessary, use BACK of this form.)(Cont. on back)

Name of Plugging Contractor \_\_\_\_\_ License No. \_\_\_\_\_

Address \_\_\_\_\_

NAME OF PARTY RESPONSIBLE FOR PLUGGING FEES: 7-15-97

STATE OF \_\_\_\_\_ COUNTY OF \_\_\_\_\_, ss.

(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) John Gestner

(Address) \_\_\_\_\_



SWORN TO before me this 14 day of July, 19 97

Donna Gestner  
Notary Public

My Commission Expires: 6-24-2001

Poz, 100# hulls. Max pressure 300 psig, ISIP 100 psig. 8 5/8" pumped 25 sacks  
60-40 Poz, 10% gel. Max pressure 500 psig, ISIP 200 psig. Completed at 4:30 P.M.