

STATE OF KANSAS  
STATE CORPORATION COMMISSION  
130 South Market, Room 2078  
Wichita, KS 67202

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

15-109-20656-00-00

TYPE OR PRINT  
NOTICE: Fill out completely  
and return to Cons. Div.  
office within 60 days.

API NUMBER 15-109,20,656-00-00

LEASE NAME Boxberger/Combs

WELL NUMBER #1 (NE SW SW)

990 Ft. from S Section Line  
990 Ft. from W Section Line

SEC. 8 TWP. 11S RGE. 34 XXXXX (W)

COUNTY Logan

Date Well Completed 10-8-97

Plugging Commenced 8:30 P.M., 10-8-97

Plugging Completed 11:00 P.M., 10-8-97

LEASE OPERATOR John O. Farmer, Inc.

ADDRESS P.O. Box 352, Russell, KS 67665

PHONE# (785) 483-3144 OPERATORS LICENSE NO. 5135

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

The plugging proposal was approved on \_\_\_\_\_ (date)  
by \_\_\_\_\_ (District #4) \_\_\_\_\_ (KCC District Agent's Name).

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

Producing Formation \_\_\_\_\_ Depth to Top \_\_\_\_\_ Bottom \_\_\_\_\_ T.D. 4860'

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
				8-5/8"	249' @ 257'	

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 #1 @ 2740' w/25 sks. cement 15 sks. cement in rathole  
 Plug #2 @ 1650' w/100 sks. cement Total cemented w/190 sks. 60/40 Pozmix, 6% gel,  
 Plug #3 @ 310' w/40 sks. cement 1/4# floseal per sk.  
 Plug #4 @ 40' w/10 sks. cement

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

Name of Plugging Contractor Abercrombie RTD, Inc. License No. 30684

Address 150 North Main, #801 - Wichita, KS 67202-1383

NAME OF PARTY RESPONSIBLE FOR PLUGGING FEES: John O. Farmer, Inc.

STATE OF Kansas COUNTY OF Russell, ss.

John O. Farmer III

XXXXXXXXXXXXXXXXXXXXXXXXXXXX (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 O. Farmer III*

(Address) P.O. Box 352, Russell, KS 67665

SUBSCRIBED AND SWORN TO before me this 6th day of November, 19 97

*Margaret A. Schulte*  
Notary Public  
Margaret A. Schulte

