K.A.R.-82-3-117

15-109-20633-00-00
TYPE OR PRINT
NOTICE: Fill out completely and return to Cons. Div. office within 30 days.

API NUMBER 109-20633 0000

●SE NAME Hubert "E"

WELL NUMBER 1

330 Ft. from S Section Line

330 Ft. from E Section Line

SEC. 25 TWP. 11s RGE. 34 XXX or (W)

COUNTY Logan

Date Well Completed 10/27/96

Plugging Commenced 12:15AM 10/27/96

Plugging Completed 3:30AM 10/27/96

LEASE OPERATOR AFG Energy, Inc.

ADDRESS P.O. Box 458 Hays, Kansas 67601

PHONE/ (913)625-6374   OPERATORS LICENSE NO. 3456

Character of Well D&A

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

The plugging proposal was approved on 10/25/96 (date)

by Ken Kuhn (KCC District Agent's Name).

Is ACO-1 filed? Yes   If not, is well log attached? Yes

Producing Formation None   Depth to Top____ Bottom____ T.D. 4805

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	296	8 5/8	296.17	None

Describe in detail the manner in which the well was plugged, indicating where the mud fluid w placed and the method or methods used in introducing it into the hole. If cement or other plu were used, state the character of same and depth placed, from__ feet to __ feet each se

1st Plug @ 2650'w/25sks   10sks In Mouse Hole   Circulated 1st Plug 15 Minutes with 51 Vis Mud
2nd Plug @ 1560'w/100sks   15sks In Rat Hole   Plugs displaced with mud
3rd Plug @ 350'w/40sks   Total 200sks 60/40 Poz 6%Gelw/¼#FS/sk By Allied Cementing
4th Plug @   40'w/10sks   Job Completed @ 3:30AM 10/27/96

Name of Plugging Contractor Discovery Drilling, Inc.   License No. 31548

Address P.O. Box 763   Hays, Kansas 67601

NAME OF PARTY RESPONSIBLE FOR PLUGGING FEES: AFG Energy, Inc.

STATE OF KANSAS   COUNTY OF ELLIS , ss.

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

(Signature) Edgar L Glassman

(Address) P.O. Box 458; Hays, KS 6764

Linda K. _____
Notary Public

My Commission Expires: 2/5/200

USE ONLY ONE SIDE OF EACH FORM

Form CP.
Revised 05-