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|--|--|--|-----------------------------|--|--|---|--|--|--|--|
| STATE OF KANSAS STATE CORPORATI 200 Colorado De Wichita, Kansas | ON COMMISSION orby Building 67202 | WELL PLUGGING RECORD K.A.R82-3-117 | | | | API NUMBER 15-163-02235-00-00 | | | | |
| | ic 1.5 2001 a | TYPE ICE: Fill nd retur office wi | n to | complete Cons. Di | 1 <u>y</u> v. <u>330</u> | WELL NUMBER | | | | |
| K(LEASE OPERATOR | MURFIN DRILLING | COINC | | | | SEC. 34 TWP. 10 RGE. 20 (E) or (X) | | | | |
| | J. WATER SUITE | | | 67202 TA KS | | ROOKS | | | | |
| PHONE ! (78) 421 | 1 - 2/03 OPERATORS | LICENSE | NO. <u>З</u> | 0606 | N stsC | ell Completed NA | | | | |
| Character of We | 11 0/ | | Piuggi | AME BRIGGS ABER 1 St. from S Section Line Ft. from W Section Line TWP. 10 RGE. 20 (E) or W ROOKS I Completed NA Commenced 8-10-01 (date) District Agent's Name). PBTD 3637 m36/7 T.D. 37/2 D Pulled out O O O ROWN SACSG 3201X REPUMPSO 1518 KO-40 FRM. form.) icense No. | | | | | | |
| (011, Gas, D&A, | SWD, Input, Water S | Pluggi | ng Completed <u>8-10-01</u> | | | | | | | |
| The plugging pr | oposal was approved | on | 8-10 | 0-01 | | (dате) | | | | |
| by DENNIS | HAMEL | | | | (K | CC District Agent's Name). | | | | |
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| (If a | idditional descripti | on is nec | essar | y, use <u>3</u> | ACK of this | form.) | | | | |
| Name of Plugging | Contractor | , | | | | License No | | | | |
| Address | | | | | | | | | | |
| NAME OF PARTY RE | SPONSIBLE FOR PLUGG | ING FEES: | | | | | | | | |
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| above-described | well, being first d | uly sworn | on o | ath, say | s: That I h | f Operator) or (Operator) ave knowledge of the fact | | | | |

HOTARY PUBLIC - State of Kansas DONNA GERSTNER My Appt. Exp. 4-27-05

TO before me this

Notary Public 6-24-05

My Commission Expires:

ALLIED CEIVENTING CO., INC. bubb
15-163-02235-0000
SERVICE POINT:
P

.rto p.o. box 31 Russell, Kansas 67665

| /- ad | SEC. | TWP. | RANGE | C | ALLED OUT | | | CATION | | START | JOB FINISH |
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