STATE OF KANSAS STATE CORPORATION COMMISSION

Give All Information Completely Make Required Affidavit Mail or Deliver Report to: Conservation Division State Corporation Commission

WELL PLUGGING RECORD

5-065-0220	1	(

Mail or Deliver Report to: Conservation Division					,				
State Corporation Commission 800 Bitting Building Wichita, Kansas		Gı	raham	Coun	tv. Sec. 8 1	wp. 10S Ro	e. 23W (E) (W)		
Wichita, Kansas NORTH		Location as "N	E/CNW%SW%" or	footage fr	om lines SE/4	, SE/4, S	E/4 \-/\		
NORTH		Lease Owner	Ameraua re	PLOTER	Corporati	on			
	i	Lease Name	Irma Law ".				Well No1		
	!	Office Address	Box 197 -	Great B	end, Kansa	8			
		Character of Well (completed as Oil, Gas or Dry Hole) Dry Hole.							
	į la	Date well completed July 29, 19 22							
	!	Application for plugging filed July 30, 19 55 Application for plugging approved July 30, 19 55 Plugging commenced July 30, 19 55 Plugging completed July 30, 19 55 Reason for abandonment of well or producing formation Dry Hole.							
	 								
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	!								
		Reason for abar	ndonment of well	or producir	g formation	Dry Hole.			
	#1		<u> </u>						
	•		well is abandoned						
Locate well correctly on al				hé Conserv	ation Division o	or its agents be	efore plugging was com		
Castian Dist		menced?Y	es No E	ldon Do	++C II	- Vancas			
Name of Conservation Agent v	vho supervi	sed plugging of thi	s well PIF. E.	rdon Le	cey or nay	s, mansas	20101		
Producing formation				Botto	n	Total Depth o	of Well 3740' Fee		
Show depth and thickness of a	ll water, oil	l and gas formation	ns.				•		
OIL, GAS OR WATER R	ECORDS						CASING RECORD		
	====				1	1	PULLED DUT		
FORMATION		CONTENT	FROM	то .	SIZE	PUT IN			
					8-5/8"	2451	None.		
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Describe in detail the m						1			
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			1/12		08-03-	55	,		
<u></u>		<u> </u>	12 TEVATION	DIVISI	0 v				
	Managa Sanga								
							:		
		(If additional	description is necessa	ry, use BACI	of this sheet)				
Name of Plugging Contractor.		rbour Drill	ing Co.						
Address	Tr	ılsa, Okla.							
STATE OF Kansas		COL	INTY OF BE	rton					
STATE OF R. A. DI	ealca	, COC				., SS.	\ of the chara describe		
The state of the s		. That I have less) of the above-describe		
well, being first duly sworn or						s neiem conta	med and the log of the		
above described well as filed	and that th	e same are true ar	id correct. So he	p me coo	10 11				
B(:)		• •	(Signature)	-001	crake	<u></u>			
					Box 197 - (Great Bene	d, Kansas		
			0			Address)			
SUBSCRIBED AND SWORN	то before 1	ne this 2	day of	luge	ot-	, 19.	55		
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My commission expires Lu	ne 24	1 1959		/	/	/	пошту кивис.		
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