

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

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

15-065-01724-00-00
Drilling completed
April 10, 1954

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

LEASE NAME DeYoung "A"
WELL NUMBER #1
4950 Ft. from S Section Line
2310 Ft. from E Section Line
SEC. 11 TWP. 10S RGE. 21 (XXXX(W)
COUNTY Graham
Date Well Completed 4-10-54
9:45 A.M.
Plugging Commenced 9-7-89
10:45 A.M.
Plugging Completed 9-7-89

LEASE OPERATOR John O. Farmer, Inc.
ADDRESS P.O. Box 352, Russell, KS 67665
PHONE# (913) 483-3144 OPERATORS LICENSE NO. 5135

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

The plugging proposal was approved on September 5, 1989 (date)

by District #4 (KCC District Agent's Name).

Is ACO-1 filled? Drilled prior to inception If not, is well log attached? Yes

of ACO-I
Producing Formation Arbuckle Depth to Top 3813' Bottom 3817' T.D. 3817'

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
Arbuckle	oil & water	3813'	3817'	8-5/8"	158'	-0-
				5-1/2"	3814'	-0-

RECEIVED
STATE CORPORATION COMMISSION
9-17-1989

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.
5-1/2" casing - mixed 50 sks. cement and cement circulated around backside. Shut in backside and mixed 300 sks. cement w/700# hulls @ 500# maximum PSI - had no shut in pressure.

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

Name of Plugging Contractor John O. Farmer, Inc. License No. 5135

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

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

STATE OF Kansas COUNTY OF Russell, ss.

John O. Farmer III ~~EMPLOYEE OF OPERATOR XXXX~~ (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.

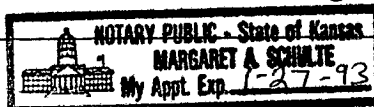
(Signature) John O. Farmer III

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

SUBSCRIBED AND SWORN TO before me this 11th day of September, 19 89

Margaret A. Schulte
Notary Public

My Commission Expires:



OPERATOR Jones, Shelburne & Farmer, Inc.

15-065-01724-00-00
FORMATION RECORD

ADDRESS Russell, Kansas

Give detailed description and thickness of all formations drilled through, contents of sand, whether dry, water, oil or gas.

640 Acres
N

COUNTY Graban SEC 11 TWP 10 RGE 21

COMPANY OPERATING Jones, Shelburne & Farmer, Inc.

OFFICE ADDRESS Russell, Kansas

FARM NAME DeYoung WELL NO. 1

DRILLING STARTED 4-1 1954 DRILLING FINISHED 4-10 1954

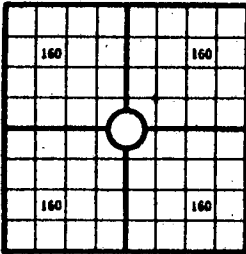
DATE OF FIRST PRODUCTION _____ COMPLETED _____

WELL LOCATED N $\frac{1}{4}$ W $\frac{1}{4}$ NE $\frac{1}{4}$ North of South

Line and _____ ft. East of West Line of Quarter Section

Elevation (Relative to sea level) 2256 DERRICK FLOOR GROUND

CHARACTER OF WELL (Oil, gas or dryhole) Oil



Locate well correctly

OIL OR GAS SANDS OR ZONES

Name	From	To	Name	From	To
1			4		
2			5		
3			6		

Perforating Record if Any

Shot Record

Formation	From	To	No. of Shots	Formation	From	To	Size of Shot

CASING RECORD

Amount Set						Amount Pulled				Packer Record	
Size	Wt.	Thds.	Make	Ft.	In.	Ft.	In.	Size	Length	Depth Set	Make
5/8				158							
5/8				3874							

Liner Record: Amount _____ Kind _____ Top _____ Bottom _____

CEMENTING AND MUDDING

Size	Amount Set		Sacks Cement	Chemical		Method of Cementing	Amount	Mudding Method	Results (See Note)
	Ft.	In.		Gal.	Make				
5/8	158		100						
5/8	3874		75						

Note: What method was used to protect sands if outer strings were pulled? _____

NOTE: Were bottom hole plugs used? _____ If so, state kind, depth set and results obtained _____

TOOLS USED

Rotary Tools were used from _____ feet to _____ feet. Cable tools were used from _____ feet to _____ feet, and from _____ feet to _____ feet, and from _____ feet to _____ feet.

Type Rig _____

INITIAL PRODUCTION TEST

Describe initial test: whether by flow through tubing or casing or by pumping _____

Amount of Oil Production _____ bbls. Size of choke, if any _____ Length of test _____ Water

Production _____ bbls. Gravity of oil _____ Type of Pump if pump is used, describe _____

Formation	Top	Bottom	Formation	Top	Bottom
Shale	0	162			
Shale clay sand	162	995			
Shale & sand	995	1450			
Bedbed	1450	1600			
Gray shale & red bed	1600	1735			
Anhydrite	1735	1774			
Shale & shells	1774	2135			
Shale & lime	2135	2365			
Lime & shale	2365	2700			
Shale & lime	2700	3040			
Shale & streak lime	3040	3150			
Shale & lime	3150	3250			
Lime & shale	3250	3596			
Lime	3596	3646			
Lime & shale	3646	3805			
Shale & lime	3805	3817			

RECEIVED
STATE OPERATIONS COMMISSION
9-12-1989
SEP 12 1989

TOPS:
Elevation 2256 R. B.
Hoebner 3467
Toronto 3491
Lansing 3508
Base of H. C. 3736
Narraton 3747
Cherty Cong. 3787
Arkuckle 3813
T. D. 3817

I, the undersigned, being first duly sworn upon oath, state that this well record is true, correct and complete according to the records of this office and to the best of my knowledge and belief.

John Farmer, Inc. Pres.
Name and title of representative of company

Subscribed and sworn to before me this 13th day of April 1954
My Commission expires April 23, 1956
Ronnie Perryhill
Notary Public

WELL NO. 1 COUNTY Graban SEC. 11 TWP. 10 RGE. 21