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

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

15-065-22004-00-01

API NUMBER 15-065-22,004

LEASE NAME Acheson

WELL NUMBER #10 SWD

1650 Ft. from ~~S~~ N Section Line

330 Ft. from E Section Line

SEC. 14 TWP. 10S RGE. 21W (~~E~~ or (W)

COUNTY Graham

Date Well Completed 6-26-84

Plugging Commenced 10:00 A.M. 1-19-94

Plugging Completed 11:15 A.M. 1-19-94

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

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 SWD

(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? Yes If not, is well log attached? _____

SWD
~~Producing~~ Formation Arbuckle Depth to Top 3873' Bottom 3961' T.D. 3961'

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"	(216')	-0-
				5-1/2"	(3873')	-0-

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 plug were used, state the character of same and depth placed, from ___ feet to ___ feet each set
Down 5-1/2" casing mixed 1 sk. hulls w/100 sks. Common cement followed w/4 sks. hulls, 310 sks. cement - maximum pressure 700#, shut in @ 200#. Down 8-5/8" casing mixed 15 sks. cement - maximum pressure - 1000#, shut in @ 600#. The casing was perforated as follows prior to cementing: 2 shots from 2300-2301', 2 shots from 1750-1751', 2 shots from 960-961'.

Name of Plugging Contractor Allied Cementing Company, Inc. License No. _____

Address P.O. Box 31, Russell, KS 67665

RECEIVED
STATE CORPORATION COMMISSION
FEB - 3 1994
2-3-1994
CONSERVATION DIVISION
Wichita, Kansas

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~~ or ~~Operator~~) (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 2nd day of February, 19 94

Margaret A. Schulte
Notary Public
Margaret A. Schulte

My Commission Expires: _____

USE ONLY ONE SIDE OF EACH FORM

NOTARY PUBLIC - State of Kansas
MARGARET A. SCHULTE
My Appt. Exp. 1-27-97

Form CP-4
Revised 05-88