STATE OF KANSAS STATE CORPORATION COMMISSION 200 Colorado Derby Building	WELL PLUGGING RECORD K.A.R82-3-117	API NUMBER <u>Unknown</u>
Wichita, Kansas 67202		LEASE NAME <u>Diebolt LKC Unit</u>
	TYPE OR PRINT	WELL NUMBER 5-2
	NOTICE: Fill out completely and return to Cons. Div. office within 30 days.	3630 Ft. from S Section Line 4620 RT = CC 3630 Ft. from E Section Line
LEASE OPERATOR Geneva Resource 50 California Street,	Suite 930	SEC. 21 TWP. 10 RGE. 23 (\$) or (W)
San Francisco, CA 941	11	COUNTY <u>Graham</u>
PHONE # (415) 291-9500 OPERA	TORS LICENSE NO. 30241	Date Well Completed 08/09/54
Character of Well Oil		Plugging Commenced 10/15/91
(Oll, Gas, D&A, SWD, Input, Wa	ter_Supply Well)	Plugging Completed
The plugging proposal was appro	oved on <u>October 15, 1991</u>	(date)
by Carl Goodrow		(KCC District Agent's Name).
is ACO-1 filed? <u>Unknown</u> If		
Producing Formation <u>LKC</u>		
Show depth and thickness of all		
OIL, GAS OR WATER RECORDS	•	SING RECORD DECEMEN
Formation Content	IFOOT IT. IC.	TILULIA COMMISSION
	From To Size Surface 215 8-5/8"	Put In Pulfied to 14 215 None
LKCOil	Surface 3848 5-1/2"	3848' None NOV 4 1991
Describe in detail the manner i	n which the well was plugged,	indicating where the mud fluid w
more doca, since the characte	BE OI SAMA AND DANTH HISKA	to the hole. If cement or other plud, from feet to feet each se
TELLOLACE LIVE AND 1975	PUMIDED 150 SY 65/35 DOZMIY A	vontaining 100 gal and 400 lb-
Closed in at 200 psi. The 5-1/2	ouris down 8-5/8" casing to a 2" casing squeezed closed in	at a pressure of 400 psi.
(If additional descr	iption is necessary, use BACK	of this form.)
Name of Plugging Contractor	Allied Cementing Company	License No.
Address P. O. Box 31, Russel	l, KS 67655	. :
NAME OF PARTY RESPONSIBLE FOR PE	LUGGING FEES:Geneva Resou	rces, Inc.
STATE OF <u>California</u>	COUNTY OF San Francis	CO,ss.
Thomas G. Smith	(Em	ployee of Operator) or (Operator) o
above-described well, being firs statements, and matters herein the same are true and correct, s	of duly sworn on oath, says: ' I contained and the log of the	proyee of Operator) or (Operator) or That I have knowledge of the facts e above-described well as filed tha
	(Signature)	
	(Address) <u>S</u>	an Francisco, CA 94111
OFFICIAL DEAL AND	SWORN TO before me this 3/	day of October , 19 9/
Notary Public-California SAN FRANCISCO COUNTY My Commission Expires	Jacque	elen Wishon
W. Concert of the Control of the Con	Me ha 11	~

Revised 05-88