STATE OF KANSAS STATE CORPORATION COMMISSION 200 Colorado Derby Building	WELL PLUGG!? K.A.R82	API NUM	API NUMBER <u>Unknown</u>				
Wichita, Kansas 67202			LEASE N	LEASE NAME <u>Diebolt LKC Unit</u>			
	TYPE OR PRINT		WELL NU	WELL NUMBER 14-2			
	NOTICE: Fill out and return to office within	Υ	990 Ft. from S Section Line				
	orrived brilling Jo days.		2970	2970 Ft. from E Section Line			
LEASE OPERATOR <u>Geneva Resources</u> , <u>Inc.</u> 50 California Street, Suite 930 ADDRESS San Francisco, CA 94111			SEC. 28	TWP. 10 RG	. 23 (K) or (V	#)	
			COUNTY	Graham			
PHONE# (415) 291-9500 OPERATORS LICENSE NO. 30241				il Completed	1955		
Character of Well Oil			Pluggin	g Commenced	1/23/91		
(Oll, Gas, D&A, SWD, Input, Wa	ter Supply Well)		Pluggin	g Completed	1/23/91		
The plugging proposal was appro	oved on <u>Januar</u>	y 23, 1991			(date	;)	
by <u>Carl Goodrow</u>							
is ACO-1 filed? <u>Unknown</u> if	not, is well log	attached?_	Yes				
Producing FormationLKC	Depth to	Тор 3610) Botte	om <u>3860</u> T.	D3862		
Show depth and thickness of all		•		•			
OIL, GAS OR WATER RECORDS				RD	RECEIVED	wee.	
Formation Content	From To	Size	Put in	Pulled out	Z-19-1991	 1	
	Surface 2	40 <u>8-5/8"</u>	240	-0	FEB 1 9 1991	L_	
LKCOil	Surface 38	70 5-1/2"	3870'		ONOCONATION DWG	IGN	
				. 0.	- Wighita, Kansas		
Describe in detail the manner i	n which the well	was plugge	d, Indicati	ng where th	e mud fluid	w a	
placed and the method or method were used, state the charact	er of same and	depth plac	ed. from	feet to	feet each	set	
<u>11ed onto 8-5/8" casing and pump</u>	oed 10 sx of ceme	nt. Hooked	l up to 5-1.	/2" casing a	nd pumped 33	0	
sx of cmt to a max. press. of 80	00 psi. Closed i	n at 800 ps	si. Plugge	<u>d rat hole w</u>	ith 10 sx of		
(If additional descr	Intion is noness	D.A	OV				
			CK OF This	torm.)			
Name of Plugging Contractor	Halliburton Serv	ices		Icense No	5287		
Address P. O. Box 428, Hays, I	KS 67601						
NAME OF PARTY RESPONSIBLE FOR P	LUGGING FEES: _G	eneva Resou	rces, Inc.		****		
STATE OF <u>California</u>	COUNTY OFSai	n Francisco		,ss.			
Thomas G. Smith		({	Employee of	Operator) d	or (Operator)) (
above-described well, being fir statements, and matters herei the same are true and correct,	n contained and t	oath, savs:	: That I ha	ve knowledge	of the fac	+ e	
		(Signature)		mia Street,	1 Suite 930		
		and the second second	San Franci	isco, CA 941			
SUBSCRIBED AND	SWORN TO before	me this	of the gay o	+ Februar	ال ١٩ ١٩		
OFFICIAL SEAL		Direld	i Jages	W	7		
GERALDINE SAGESERnmi sion	Expires: <u>Mar.</u> 6	12, 1991	в тюм	ry Public			
SAN FRANCISCO COUNTY My comm. expires MAR 22, 1991					Form CP Revised 05-	- 4 - 8 8	
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