STATE OF	KANSAS	
STATE COF	RPORATION	COMMISSION
200 Color	ado Derby Kansas 6	Building 57202

12-021	-0609	4-	000	1

STATE OF KANSAS STATE CORPORATION COMMISS	SION	K.A.R82-3-117			API NUMI	API NUMBER D-08-016 LEASE NAME Alice Rome WELL NUMBER 4			
200 Colorado Derby Bulldi Hichita, Kansas 67202	Ing				LEASE NA				
•									
				completely Cons. Div.		_ ft. fr	om S Sect	lon Line	
	ofi	ilce wit	hin :	30 days.		_ft.fr	om E Sect	ion Line	
LEASE OPERATOR Fell Oi	.1 & Gas Co) .			SEC. 18	TWP. 11:	SRGE 16W	kk);pr(₩)	
ADDRESS Box 466 Cha	ISA KS 6	7524			COUNTY	E1:	lis		
PHONE (316) 938-2982	•			1	Date We	li Compl	eted		
Character of Well SWD					Plugging	g Commen	ced		
(Oll, Gas, D&A, SWD, Inpu		ply Wel	1)	i	Plugglng	Comple	ted	2-90	
The plugging proposal was								_ (date)	
by		-			(KC	Distri	ct Agent!	s Name).	
Is ACO-1 filed?								,	
Producing Formation								23	
Show depth and thickness									
		, •	3	1	ASING RECOF	RD			
OIL, GAS OR WATER RECORD			.,						
Formation Conten	†	From	То	Size	Put In		out RT KC	C	
				16"	101	125	··		
				10 3/4" 7"	986' 3307'	125			
Describe in detail the ma		h +ho w		as plugger	l Indicati	na wher	e the mud	fluid was	
	- mathade use	id in In	trodi	icina it ii	110 1110 1101	9. 11 6	011101110	011101 F1 "3"	
vere used, state the ch	naracter of	same a	nd d	epth plac	ea, from a w/150 c	_reer r	0/40 poz	2 8%	
gel follo	owed w/5 s 50 sacks c	acks to	11	in 150	sacks cen	ent w/	400 psi		
(If additional				_			÷ 57 - 11	war war war	
lame of Plugging Contract	or <u>KELSO</u>	CASIŅ	G PU	LLING, I	NC. L	.icense	No. 6050)	
Address P.O. Box 34	7 Chase, K	ansas	675	24	\$7		CEIVED IATION CÓMMIS	SION RCUO	
NAME OF PARTY RESPONSIBLE	—·			Fell Oi	l & Gas C			08-24-9	
STATE OF Kansas	COU	NTY OF		Rice		,SS.	ATION DIVICION		
R. Dar	rell Kelso			(1	Employee of	OpeWach	ATION DIVISION Ior, Karostas (O 1	perator) of	
above-described well, bellstatements, and matters	herein cont	ained a	na Tr	oath, says: ne log of	the above-o	ive know lescribe	ledge of d well as	the facts, filed that	
the same are true and cor	rect, so her	p me Go	a. (Signature	Make	- 90	dr_		
			(Address)	P.O. Box	k 347 C	hase,KS	67524	
SUBSCRIB	ED AND SWORN	l TO bef	ore n	ne this 2	2 day	t Aug	ust	<u>,19 90</u>	
		(455-028173 N		M	me i	1/en	freng		
•		\$4 ·			Norta	ry Publ	10		

My Commission Expire \$:

IRENE HERZBERG State of Kansas My Appt. Exp. Aug. 24, 1993

Form CP-4 Revised 05-88