

To:

STATE CORPORATION COMMISSION

Wichita State Office Bldg. - PLUGGING SECTION

130 S. Market, Room 2078

Wichita, Kansas 67202

## TECHNICIAN'S PLUGGING REPORT

Operator License # \_\_\_\_\_

Operator: state of kansas fee fund

Name &amp; \_\_\_\_\_

Address \_\_\_\_\_

AB oil well xxxxxxx Gas Well \_\_\_\_\_ SWD Well/ Input Well \_\_\_\_\_

Other well as hereinafter indicated: \_\_\_\_\_

Plugging Contractor: kepley well ser.

Lic. #

30670Address: 19245 ford rd. chanute, ks. 66720Company to plug at: Hour: 30 Day: \_\_\_\_\_ 3 Month: \_\_\_\_\_ 2009

Plugging proposal received from: \_\_\_\_\_

Company Name: \_\_\_\_\_

Phone: \_\_\_\_\_

Were: squeeze well inside & outside of casing to surface.

Plugging Proposal Received by: \_\_\_\_\_

TECHNICIAN

Plugging attended by Agent: All xxxxxxx Part \_\_\_\_\_

None \_\_\_\_\_

Operations Completed: Hour: \_\_\_\_\_ 7 Day: \_\_\_\_\_ 4 Month: \_\_\_\_\_ 2009

Actual Plugging Report: ran 1" inside of 2" to 745' ran 1" outside of 2" to 645' pumped 182 sxscement to surface. Cut off well empty pit and close.

KANSAS CORPORATION COMMISSION

APR 23 2009

RECEIVED

Remarks: contract 311787 control #20090015-018(If additional description is necessary, use BACK of this form.)

I

observe this plugging.

Signed:

  
 \_\_\_\_\_  
 TECHNICIAN