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

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

AP I	NUMBER	15-167-22,401 <i>-00</i> -00
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	TYPE OR PR	RINT
NOTICE	: Fill out	completely
and	return to	Cons. Div.
off	ice within	30 days.

LEAS	NAME_	Nowak	G	
WELL	NUMBER	#1		

		office wit	hin 3	ons. Div. O days.	***************************************	_ Ft. from S	Section Line		
	·					Ft. from E SW SW SW	Section Line		
LEASE OPERATOR	ERATOR Donald C. Slawson				SEC	TWPRGE.	(E)or (A)		
ADDRESS	200 Douglas Bldg. 104 S. Broadway Wichita, Kansas 67202					COUNTY Russell			
PHONE #(316) 263-	-3201 OPERATO	ORS LICENSE N	0	5181	Date We	II Completed			
Character of Wel	0i1	•			Pluggin	g Commenced	5-10-88		
(OII, Gas, D&A,	SWD, Input, Wate	or Supply Wel	D.		Pluggin	g Completed _5	5-12-88		
Did you notify 1	the KCC District	Office prior	to p	lugging t	his well?	Yes	·		
·	did you notify:								
Is ACO-1 filed?	If c	ot, is well	log a	ttached?	,				
	lon					Om T.D			
	hickness of all					1.0	•34.25.		
		1	·u ga						
OIL, GAS OR WAT	ER RECORDS			С	ASING RECO	RD			
Formation	Content	From	Ϋ́ο	SIze	Put in	Pulled out			
				8-5/8"	430'	none			
				4-1/2"	3424'	2168'			
		——-[——- _[<u> </u>					
escribe in deta	II the manner in	which the we	l w	as plugge	d, Indicati	ng where the	mud fluid wa		
	method or method te the characte								
Plugged off l	pottom with sand	to 3025' and	4 s	acks cemen	nt. Shot	pipe @2600'.	2400 ' .		
and 150 sacks	a cocar or 54	joints of 4-1	<u>/2" c</u>	easing.	Plugged si	irface with 50	00# hulls		
	D1	nagina Camala							
(If a	dditional descri	ption is nece	ssary	, use BAC	K of this	form.)			
lame of Plugglng	Contractor K	elso Casing P	ullir	ng, Inc.		icense No. 60	050		
	Box 347 CI					-			
STATE OF Kans		COUNTY OF		ce		,ss.			
R. Darrell Ke				(Fmc	loves of C	neratori or	(Operator) of		
bove-described	well, being fir	st duly sworn	on c	ath, savs	: That I h	AVA KNOWLAGO	of the trate		
italoments, and i	matters herein c e and correct, s	ontained and	the I	og of the	above-des	Gribed well	as filed that		
ne same are iru	e and correct, s	o neip me God	•	Signature)	Rhh	med 9	also-		
			(#	(ddress	Box 347 Chase, Ka	nsas 67524REC	EIVED		
	SUBSCRIBED AND	SWORN TO befo	r e me	this	13thday o	May	, 1988		

My Commission Expires:



CONSERVATION DIVISION
Wichita, Kanses CP-4
Revised 07-86