STATE OF KANSAS STATE CORPORATION COMMISSION 200 Colorado Derby Building	WELL PLUGG K.A.R	t NG   82-3	RECORD -117		API NUMBER <u>IS-OSI-OSQ23-0090</u> LEASE NAME Baumer		
dichita, Kansas 67202	TYPE OR PRINT NOTICE: Fill out completely and return to Cons. Div. office within 30 days.			3630	WELL NUMBER B-16  3630 Ft. from S Section Line  AND YECL  3630 Ft. from E Section Line		
LEASE OPERATOR Phillips PetroleumCOmpany					SEC. 27 TWP. 115 RGE. 17W (& DOF (W)		
ADDRESS Box 20-A Rt #3 Great Bend, KS. 67530					COUNTY Ellis		
PHONE (316) 793-8421 OPERATORS LICENSE NO. 5229					I Completed		
Character of Well Oil					Commenced 8-27-90		
(Oll, Gas, D&A, SWD, Input, Water Supply Well)					Completed 9-11-90		
The plugging proposal was app	roved on				(date)		
by				(KC	C District Agent's Name).		
Is ACO-1 flied?	f not, is well i	og a	ttached?				
Producing Formation	Depth	to T	ор	Botte	omT.D3555'		
Show depth and thickness of a							
OIL, GAS OR WATER RECORDS				CASING RECO	RD		
Formation Content	From	То	Size	Put in	Pulled out		
				38'	none		
			10 3/4	1 1 2 9 5 ' 3 5 4 2 '	1936'		
			·\ <del></del>	_			
Describe in detail the manner placed and the method or met were used, state the character Sanded because 10 miles.	ter of same an	nd de	epth pla	ced, from_	le. If cement or other plue feet tofeet each seed some seed tofeet each seed some seed tofeet each seed eac		
(If additional des							
(If additional des							
Address P.O. Box 347 Ct					t typesy—.		
NAME OF PARTY RESPONSIBLE FOR	PLUGGING FEES:		Phillip	s Petrole	umCompany		
STATE OF Kansas	COUNTY OF		Rice	<u> </u>	_,ss. (1) [ 8 [900] 09-18-97		
R. Darrel				a. That I h	f Operator) or (Operator) ave knowledge of the fact		
R. Darrel above-described well, being f statements, and matters her the same are true and correct	. Oll Container of		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	•	described well as filed to		
					x 347 Chase, KS. 67524		
SUBSCRIBED A	AND SWORN TO bef	ore i	me this _	13 day	of Sept. 19 90		

STATE OF	Kansas	COUNTY OF	Rice	,, \$5.	09-18-90	
	R. Darrel	l Kelso	(Em	ployee of Operate	erator) or (Operator) o	
statements	, and matters he	first duly sworn o rein contained and t, so help me God.	n oath, says: \\ the log of the (Signature)	1/-	ledge of the facts d well as filed tha	
			(Address) <u>F</u>	O. Box 347 C	hase, KS. 67524	
	SUBSCRIBEO	AND SWORN TO befor	e me this 1	- "" (	pt. ,19 90	
	My Commissi	on Expires:	IRENE HERZ State of Kar My Appt. Exp. Aug	nsas 1	Form CP-4 Revised 05-88	