WELL PLUGGING RECORD

API NUMBER_	15-051-24,340-00-0
LEASE NAME	Lang

TATE CORPORATION COMMISSION	K.A.R82-3	-117	API NUMBER 15-051-24,340 4
00 Colorado Derby Building lichita, Kansas 67202	•		LEASE NAME Lang
	TYPE OR PRI	NT	WELL NUMBER 3
	NOTICE: FILL out	completely	SPOT LOCATION NENENW
	and return to C office within 3		280' W SEC. 6 TWP. 14RGE. 17 (W)
LEASE OPERATOR Drailing Ltd.	of Colorado		COUNTY Ellis
ADDRESS 410 - 17th St., Suite			Date Well Completed 11-4-85
PHONE #(303) 623-6144 OF	PERATORS LICENSE NO	5 804	Plugging Commenced 11:00 AM
		,	Plugging Completed 1:15 PM
Character of Well <u>D & A</u> (Oll, Gas, D&A, SWD, Input, Wa	ter Supply Well)		
Did you notify the KCC/KDHE Jo	Int District Office	prior to plug	iging this well? Yes
Which KCC/KDHE Joint Office di	i you notify? Hay	s, Kansas	
Is ACO-1 filed? Yes If	not, is well log a	ttached?	
Producing formation None	Depth to 1	rop	bottom
Show depth and thickness of al.	water, oil and ga	as formations.	•,
OIL, GAS OR WATER RECORDS			NG RECORD
Formation Con	tent From To	\$1ze Put 8-5/8 28	
		8-57.0 201	NOIRE
Describe in detail the manner	in which the well	was plugged, li	ndicating where
the mud fluid was placed and T	he method or method	to, the charact	ter of same and
pluas through dull pipe as	follows; 1250' wi	th 20 sacks	610' with 100 sacks, 340' with ole, 15 sacks in rathole.
40 sacks. 40' to surface wi	th 10 sácks, 15 sa	icks in mou^{sen}	ole, is sacks in rainole.
200 sacks total. 60-40 poz	, 6% gel, 4 sacks		
(If additional desc	ription is necessa	ry, use BACK o	f this form.)
			License No. 5287
Name of Plugging Contractor	<u>Halliburton</u>		LICENSE NO. 3207
nays. Railsas byou			
STATE OF Colorado	COUNTY OFDer	ver	
Les Olson (xxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxx	wall balos flest	(employee	of operator) or
	. statements, and M	atters herein	CONTAINES ANS
the log of the above-described	well as filed tha	t the same are	true and
correct, so help me God,		(Signature	Jes Cho-
e e e e e e e e e e e e e e e e e e e	Service of the servic	(Address)	410 - 17th St., Suite 1140 Denver, Colorado 80202
SUE	SCRIBED AND SWORN	TO before me t	his, 13thay of November , 1985
	-	Torria	ne Comurshy
My Complesion expires: 9	-2-87	RECF	Notary Public

STATE CORPORATION COMMISSION

11-18-85NOV-18

Revised 06-83

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