

STATE OF KANSAS  
STATE CORPORATION COMMISSION  
30 S. Market, Room 2078 130 S. Market  
Wichita, KS 67202

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

API NUMBER 15-071-20236-0000

LEASE NAME PLOWMAN

WELL NUMBER #1

330 Ft. from S Section Line

4950 Ft. from E Section Line

SEC. 30 TWP. 17 RGE. 39 (E) or (W)

COUNTY GREELEY

Date Well Completed \_\_\_\_\_

Plugging Commenced 6/2/99

Plugging Completed 6/2/99

TYPE OR PRINT  
NOTICE: Fill out completely  
and return to Cons. Div.  
office within 30 days.

LEASE OPERATOR SMITH CATTLE OIL & GAS

ADDRESS HC 2 BOX 201 SHARON SPRINGS, KS 67758

PHONE (785) 852-4653 OPERATORS LICENSE NO. 6085

Character of Well \_\_\_\_\_

(Oil, Gas, D&A, SWD, Input, Water Supply Well)

The plugging proposal was approved on 6/2/99 (date)

by KEVIN STRUBE (KCC District Agent's Name).

Is ACO-1 filed? NA If not, is well log attached? NA

Producing Formation Chase Depth to Top 2958 Bottom 2968 T.O. 3050

Show depth and thickness of all water, oil and gas formations.

OIL, GAS OR WATER RECORDS | CASING RECORD

| Formation | Content | From | To | Size  | Put In | Pulled out |
|-----------|---------|------|----|-------|--------|------------|
|           |         |      |    | 8 5/8 | 278'   | 0          |
|           |         |      |    | 4 1/2 | 3050'  | 0          |
|           |         |      |    |       |        |            |
|           |         |      |    |       |        |            |

Describe in detail the manner in which the well was plugged, indicating where the mud fluid was placed and the method or methods used in introducing it into the hole. If cement or other plug were used, state the character of same and depth placed, from \_\_\_\_\_ feet to \_\_\_\_\_ feet each set.

Plug bottom w/ 25SX and 200# HULLS. PERFORATE @ 1500' PUMP 90 SX then 100# HULLS WITH 80 SX PRESSURE CSG TO 300# HOOP UP TO BACKSIDE PUMP 50SX PRESSURE TO 50#

Name of Plugging Contractor Allied Cementing, Inc. License No. \_\_\_\_\_

Address BOX 31 RUSSELL, KS. 67665

NAME OF PARTY RESPONSIBLE FOR PLUGGING FEES: Joe E. Smith

STATE OF Kansas COUNTY OF ~~Butler~~ Greeley, ss.

DAVE OLSON, AGENT FOR OPERATOR. (Employee of Operator) or (Operator) o

above-described well, being first duly sworn on oath, says: that I have knowledge of the facts statements, and matters herein contained and the log of the above-described well as filed the the same are true and correct, so help me God.

(Signature) Dave Olson

(Address) Box 175 Tribune, Ks. 67879

SUBSCRIBED AND SWORN TO before me this 9<sup>th</sup> day of JUNE, 19 99

Cynthia Olson  
Notary Public

My Commission Expires: Aug. 4, 2001