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

OIL, GAS OR WATER RECORDS

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

API NUMBER 15-071-20535-00-00 LEASE NAME Spears

TYPE OR PRINT					
NOTICE:	FII	lout	completely		
and	retu	rn to	Cons. Div.		
offl	CO A	ithin	30 days.		

WELL NUMBER 1

2100 Ft. from S Section Line 4950 Ft. from E Section Line

LEASE OPERATOR Marathon Oil Company SEC. 26 TWP. 20S RGE. 42 (XX) or (W) ADDRESS _____ P. O. Box 2690, Cody, WY 82414 COUNTY Greeley Date Well Completed 01/14/91 PHONE#(307) 587-4961 OPERATORS LICENSE NO. 5171 Character of Well D & A____ Plugging Commenced 01/15/91 Plugging Completed 01/16/91 (Oll, Gas, D&A, SWD, Input, Water Supply Well)

The plugging proposal was approved on January 15, 1991 ьу _ Dan Goodrow (KCC District Agent's Name).

Is ACO-1 filled? Yes If not, is well log attached? Producing Formation ______ Depth to Top_____ Bottom______T.D.

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

Formation Surface	Content	From	То	\$1ze 8-5/8"	Put In 478' KB	Pulled out None ·
Surface None Encountered			_			
			_			

CASING RECORD

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 plugs were used, state the character of same and depth placed, from feet to feet each set. 1st Pluq: 5250'-5075' w/50 sxs. 5th Plug: 40' - surface w/10 sxs.

 1st Pluq:
 5250 -5075 W/50 sxs.
 15 sxs. III

 2nd Plug:
 2400'-2225' W/50 sxs.
 10 sxs. in II

 3rd Plug:
 1400'-1225' W/50 sxs.
 10 sxs. in II

 * All Measurements KB

 15 sxs. in rat hole 10 sxs in mouse hole

(if additional description is necessary, use BACK of this form.)

Name of Plugging Contractor Murfin Drilling Co., Inc. License No. 30606

Address 250 N. Water, Suite 300, Wichita, KS 67202

NAME OF PARTY RESPONSIBLE FOR PLUGGING FEES: Marathon 011 Company

,ss. CONGERVATION DIVISION STATE OF Kansas COUNTY OF Sedqwick

(Employee of Operator) (Employee of Operator) of Randal P. Meabon above-described well, being first duly sworn on oath, says: That I have knowledge of the facts, statements, and matters berein contained and the log of the above-described well as filed that the same are true and correct, so help me God. (Signature) RPM Rala

(Address) P. O. Box 2690, Cody, WY 82414

SUBSCRIBED AND SWORN TO before me this 59 Mase I C

Mary E. Haisch County of Park My Commission Expires

Rossessessessessessessessesses

Notary Public State of

Nov. 7, 1992

MWYESIMALIS Ton Expires: //- 7-92

Notary Public