## STATE OF KANSAS STATE CORPORATION COMMISSION

Give All Information Completely

## WELL PLUGGING RECORD

Make Required Affidavit	, Sc	Scott County. Sec. 26 Twp. 205 Rge. 33 XEVW					
Mail or Deliver Report to	Locatio	on as "NE/	CNW}sw}	" or foots	age from 1:	ines	
Conservation Division		C SW NW					
State Corporation Comm. 245 North Water					- tar	-11 N 7 = 26	
Wichita, KS 67202	Lease Name Savolt Well No.1 -26						
Office Address <u>P.O. Box 1578, Liberal, Kansas 67901</u> Character of Well (Completed as Oil, Gas or Dry Hole)							
	Charact		-	teted as	Oil, Gas of	r pry hore)	
	<del></del>		<u>iole</u>	<del></del>			
<del>   </del>		ell comple		1-14-78 G filed		19 <u>78</u>	
		Application for plugging filed 19 Application for plugging approved 11-13 (verbal) 19 78					
		Plugging commenced $\frac{11-13}{11-14}$ 19 78					
		Plugging completed 11-14 19 78					
	Reason	Reason for abandonment of well or producing formation					
	76.0		-11 4-	oboudoned	dota of	lost meduation	
	II a pi	roducing w	elf 12	abandoned,	, date or .	last production	
	Was per	rmission o	btained	from the	Conservat	ion Division or	
Locate well correctly on above Section Flist	· •				ommenced?		
Name of Conservation Agent who							
Producing formation	<del></del> •	•		ottom	Total Dep	oth of Well 5000'	
Show depth and thickness of all	l water, oil	l and gas	format1	ons.			
OTT CAS OR WATER RECORDS							
OIL, GAS OR WATER RECORDS						CASING RECORD	
FORMATION	CONTENT	. FROM	ТО	SIZE	PUT IN	. PULLED OUT	
			<del> </del>	8 5/8	530'	None	
		<del></del>	<del> </del>	<del>- </del>	<del> </del>		
		<del>                                     </del>			<del></del>		
			<del> </del>		1		
was placed and the method or method plugs were used, state the character feet for each plugged well as follows:	racter of saugreet		pth pla			f cement or other feet to	
CT. REAL		0 sacks @					
PHILE CLARENCE INFID		2 sacks @					
LION CC. TECHSTON	<del>~</del>	3sacks in	rat hol	e	<del> </del>	<del></del>	
1/01/10/1050					<del>_</del>		
CO//.'C~~7//		<del></del>	<del></del>	<del>-                                    </del>			
Print Office Brown			<del></del>		<del>- 1 - "</del>	<del></del>	
Mansas Kansas				<del></del>			
(If additional o	description	is necess	ary, us	e BACK of	this shee	t)	
Name of Plugging Contractor	-						
		<del>-</del>					
STATE OF Kansas	COUN	TY OF S	eward			SS.	
Harold K. Frauli, Agent						wner or operator)	
of the above-described well, be		•		-		-	
the facts, statements, and matt as filed and that the same are	ers nerein true and co	contained rrect. Sc	and the helm n	e Cod.	ne above-d	escribed well	
			1	0//40	0-		
	(Sig	nature)	Haro	W/CF/	lank		
	ŧ			О. Вож 15		l, Kansas	
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SUBSCRIBED AND SWORN TO be	Tore me thi	8 <u>15th</u>	day	of Novem	ber /	, 19/8	
ASSIATA RHI	ENDA J. VAN METE	a /	Kheno	10(11/	no Wet	i re	
	eward County, Ks. Appt. Exp. Feb. 12, 198	· ·	++11-11	my, UC	No	tary Public.	
My commission expires		<u> </u>		/		•	