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

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

15-135-21686-00-00

API NUMBER 9-10-79

LEASE NAME Marjorie

•	•	TYPE OR PRINT			WELL NUMBER]		
	NOTICE: Fill out completely and return to Cons. Div.				SPOT LOCATION SW SW NE		
		office with	n 30 days.			.16 RGE. 25 (E)	
LEASE OPERATOR	Beren Corp.		· · · · · · · · · · · · · · · · · · ·		OUNTY Ne		
ADDRESS Box 723	Havs, Kansa	s 67601					
					ato Well (Completed 9-1	<u>0-</u> 79
PHONE # (913) 628 6101 OPERATORS LICENSE NO. 5364					lugging Co	ommenced 7-7-	<u>89</u>
Character of Well_ (Oil, Gas, D&A, SWi	Oil D, Input, Water	Supply Well)	1	P	lugging Co	ompleted 7-7-	89
Did you notify the	KCC/KDHE Joint	District Off	ice prior t	o pluggin	g this we	II? Yes	
Which KCC/KDHE Jole	nt Office did y	ou notify?	Dist. 1	Dodae Cit	V .		
Is ACO-1 flied?	Yes If no	t, is well in	og attached?				
			·	•		T.D. 4504	_
Show depth and this	ckness of all w	ater, oil and	l gas format	ions.	RFAX	RECEIVED	
Producing formation Show depth and thic	RECORDS	<u> </u>		CASING	RECORD	CORPORATION COMMIS	S810N
Formation	Conten	t From T	o Size	Put In	Pulle	111 2 1 1983 7	7-21-
	Surface	$ \frac{1}{2}$	71 8 5/8		None	NSERVATION DIVISION Wichita, Kansas	
	Casing	— 0 4	107 - 41 ₅	-		Kansas	
the hole. If cement depth placed, from Fluid 1260' from S cement down casing annulus. Max. pre Hell plugged.	urface. Load . Max. pressu ssure 500#	nole. Take re 1000#. Sl Shut in pre	ng. rate 3 nut in pres ssure 350#.	s 900#. Put 10	Pump 40 s sks. ceme	ks. cement dow	<u>s</u> ks <u>n</u>
(If add	itional descrip		sary, usa <u>B</u>	ACK of th	ls form.)	E261	
Name of Plugging Co		en Corp. Kansas 67601	· ·		License	No. 5364	
	BJ Titan c					;	<u>;</u>
STATE OF Kans	ās	COUNTY OF	Ellis		,ss.	<u> </u>	
Mr. Ted Crawf	ord		(empl	oyee of o	perator) d	or	
(cperator) of above I have knowledge of the log of the above correct, so help me ROSEMARY SMITH NOTARY PUBLIC STATE OF KANSAS	the facts, store described we god.	atements, and	matters he hat the sam (Sign (Addr	rein conta e are true ature)ess)	alned and e	Lys, Ro 6	
MY APPT. EXP. MAY 1, 19	~/,	Tiga I	(c	Kom	Nother Fue	Att.	
My Commission expir	· · · · · · · · · · · · · · · · · · ·	////			0	Form CP-4	~{-