

15-169-00064-00-01

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

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

API NUMBER D-10 122

LEASE NAME Nelson

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

WELL NUMBER 1
660 Ft. from S Section Line

1065 Ft. from W Section Line

SEC. 32 TWP. 16 RGE. 3 (E) or (W)

COUNTY Saline

Date Well Completed 3-1963

Plugging Commenced _____

Plugging Completed 10-31-85

LEASE OPERATOR Tom Brown Construction

ADDRESS Box 387 Lindsborg Ks 67456

PHONE#(913) 227-2223 OPERATORS LICENSE NO. 6306

Character of Well S.W.D.

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

Did you notify the KCC/KDHE Joint District Office prior to plugging this well? Yes

Which KCC/KDHE Joint Office did you notify? Salina Office- Ralph Tittle

Is ACO-1 filed? _____ If not, is well log attached? None Available

Producing Formation _____ Depth to Top 223 Bottom 223 T.D. 223

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
Wellington				4 1/2		None

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.

Peterson Irrigation cleaned out hole. Unit ran 2" tubing 210'
Salina concrete ran cement, pulled tubing while filling with cement

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

Name of Plugging Contractor Tom Brown Const., Inc. License No. 6306

Address Box 387 Lindsborg

STATE OF Kansas COUNTY OF Saline, ss.

(Employee of Operator) or (Operator) of 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 that the same are true and correct, so help me God.

(Signature) Marva Walker

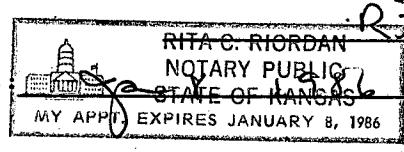
(Address) _____

SUBSCRIBED AND SWORN TO before me this 12 day of Nov, 1985

RECEIVED
STATE CORPORATION COMMISSION

NOV 19 1985

My Commission Expires _____



Rita C. Riordan
Notary Public