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

Character of Well D&A

OUT CAS OF WATER PECCENS

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

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

API NU	MBER_	15-135-23807-000	
LEASE	NAME_	Reeves	

LEASE NAME	Reeves	
WELL NUMBE	R 1_20	

1980' Ft. from S Section Line

3300' Ft. from E Section Line

SEC. 29 TWP. 185RGE. 26 (XXXX (W)

COUNTY Ness

Date Well Completed __5/11/94___ Plugging Commenced ____ 5/12/94

Plugging Completed ____ 5/12/94

The plugging proposal was approved on _____5/12/94 (date)

by <u>KCC Office (Dodge City)</u> (KCC District Agent's Name).

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

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

LEASE OPERATOR Ensign Operating Co.

ADDRESS P.O. Box 2161, Liberal, Kansas 67905-2161

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

PHONE#(316) 626-8131 OPERATORS LICENSE NO. 04782

OTE, ONE ON WATER RECORDS		 	CASTRO RECORD				
Formation	Content	From 317'	To 0	Size 8-5/8"	Put In 317'	Pulled out None	
						ting where the mud fluid w	

Producing Formation <u>N.A.</u> Depth to Top_____ Bottom_____T.D.

ere used, state the character of same and depth placed, from feet to feet each set.

PTA W/245 sx of 60/40 (Class A/Poz A) 6% Gell & k lb per sx Flocele as follows Circ'd to spot 50 sx cmt @ 2000'. Circ'd to spot 80 sx cmt @ 1130'. Circ'd to spot 40 sx cmt @ 650', Circ'd to spot 50 sx cmt @ 350', Circ'd to spot 10 sx cmt @ 40' and Circ'd 15 sx cmt in RH. Cut off and capped surf csg 3' below GL (If additional description is necessary, use BACK of this form.)

Name of Plugging Contractor <u>Duke Drilling Co..Inc.</u> License No. <u>5929</u> Address 310 W Central, Ste 117, Wichita, Kansas 67202

NAME OF PARTY RESPONSIBLE FOR PLUGGING FEES: Ensign Operating Co.

STATE OF Kansas _____ COUNTY OF <u>Seward</u>

Reed Wacker (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 filled that the same are true and correct, so help me God. (Signature)

(Address) P.O. Box 2161, Liberal, Ks. 67905

SUBSCRIBED AND SWORN TO before me this 9 day of JUNE ,19 94

My Commission Expires:

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NUTARY PUBLIC, State of Karlett o †		÷
LO Marie in present comment O.L.	brv I	ŀ
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HERB BRADY		
CALL CONTROL OF	ľ	