

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

LEASE NAME Norman

WELL NUMBER 1

3630 Ft. from S Section Line

4620 Ft. from E Section Line

SEC. 32 TWP. 18S RGE. 17W (E) or (W)

COUNTY Rush

LEASE OPERATOR A. L. Abercrombie, Inc.

ADDRESS Rt 1, Box 56 Great Bend, KS 67530

PHONE# (316) 793-8186 OPERATORS LICENSE NO. 5393

Character of Well Oil

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

Date Well Completed \_\_\_\_\_

Plugging Commenced 9-28-93

Plugging Completed 10-1-93

The plugging proposal was approved on \_\_\_\_\_ (date)

by Richard Lacey (KCC District Agent's Name).

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

Producing Formation \_\_\_\_\_ Depth to Top \_\_\_\_\_ Bottom \_\_\_\_\_ T.D. 3805'

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
				8 5/8	1163'	none
				5 1/2	3794'	2600'

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 plug were used, state the character of same and depth placed, from \_\_\_\_\_ feet to \_\_\_\_\_ feet each set.

Sanded bottom to 3744' & 5 sks cement. Shot @ 3000', 2800', & 2600'. Pulled pipe. Mixed 300# hulls, 10 gel, 50 sks cement, 10 gel, 100# hulls, released plug, mixed 150 sks cement, 60/40 pos 6% gel. Plugging complete.

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

Name of Plugging Contractor KELSO CASING PULLING, INC. License No. 6050

Address P. O. BOX 347 CHASE, KS 67524

NAME OF PARTY RESPONSIBLE FOR PLUGGING FEES: A. L. Abercrombie, Inc.

STATE OF KANSAS COUNTY OF RICE, ss.

R. DARRELL KELSO (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) R. Darrell Kelso

(Address) P. O. BOX 347 CHASE, KS 67524

SUBSCRIBED AND SWORN TO before me this 7th day of October

My Commission Expires: \_\_\_\_\_



Notary Public

RECEIVED  
STATE CORPORATION COMMISSION

OCT 11 1993  
10-11-93

CONSERVATION DIVISION  
Wichita, Kansas CP-4  
Revised 05-88