

API NUMBER 15-165-20,327-0000

LEASE NAME Dewald B

WELL NUMBER 1

2970 Ft. from S Section Line

2970 Ft. from E Section Line

SEC. 13 TWP. 17 RGE. 19 (E) or (W)

COUNTY Rush

Date Well Completed _____

Plugging Commenced 08-09-94

Plugging Completed 08-09-94

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

LEASE OPERATOR Pintail Petroleum, Ltd.

ADDRESS 225 North Market, Suite 300, Wichita, Ks. 67202

PHONE#(316) 263-2243 OPERATORS LICENSE NO. 5086

Character of Well Oil

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

The plugging proposal was approved on 08-08-94 (date)

by Duane Rankin (KCC District Agent's Name).

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

Producing Formation LKC& Penn Sand Depth to Top 3530 Bottom 3860 T.O. 3860

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
	Surface	0	5/2	8 5/8"		
	Casing	0	3855	4 1/2"		

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
Staging collar at 1424' with 375 sacks of cement, pumped 200 lbs. of hulls, pumped 125 sacks of cement 60/40 poz cement, pump 12 sacks of gel down 4 1/2" max. pressure 600 lbs. mixed 25 sacks of cement and pumped down between 4 1/2 and 8 5/8"

Name of Plugging Contractor D.S.& W. Well Servicing, Inc. License No. STATE 6901 REVISED

Address P.O. Box 231, Claflin, Kansas 67525

STATE CORPORATION COMMISSION
 8-11-94
 AUG 11 1994

NAME OF PARTY RESPONSIBLE FOR PLUGGING FEES: Pintail Petroleum, Ltd.

STATE OF Kansas COUNTY OF Barton, ss.

Arthur P. Strube (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 the the same are true and correct, so help me God.

(Signature) Arthur P. Strube

(Address) P.O. Box 231, Claflin, Kansas 67525

SUBSCRIBED AND SWORN TO before me this 10th day of August, 19 94

Karlynn K. Beck
 Notary Public

My Commission Expires: 09-21-94.

USE ONLY ONE SIDE OF EACH FORM

