STATE OF KANSAS STATE CORPORATION COMMISSION

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

484 NUMBER 15-165-21 388-00 00

200 Colorado Derby Building ,Wichita, Kansas 67202 TYPE OR PRINT NOTICE: Fill out complet and return to Cons. D	nonen-02-3-117	APT NUMBER 13-103-21,386-00-00
		LEASE NAME Miller
	TYPE OR PRINT	WELL NUMBER No. 1
	and return to Cons. Div.	Ft. from S Section Line
	office within 30 days.	4950 Ft. from E Section Cline
LEASE OPERATOR FOXFIRE EXPLOR	RATION, INC.	SEC. 24 TWP. 178 RGE. 18 (N)
ADDRESS 1022 Union Center, Wi	ichita, KS 67202	COUNTY Rush
PHONE#(316) 265-6296 OPERATORS LICENSE NO. 6177		Date Well Completed 10/21/87
1 (805) 549-0690 Character of Well <u>D&A</u>		Plugging Commenced 10/21/87
(Oil, Gas, D&A, SWD, input, Wa	iter Supply Well)	
The plugging proposal was appr		Plugging Completed 10/21/87
bySteve Durrant, Dodge City		(date)
Is ACO-1 filed? Just Filed		(KCC District Agent's Name).
		Bottom - T.D. 3703' Gran.
Show depth and thickness of al	I water, oll and gas formatio	ns.
OIL, GAS OR WATER RECORDS	CA	SING RECORD
Formation Content Basal Penn. Sand 130' SOGCW	Mud Surface 340' 8 5/8"	Put In Puntabel Ser 60 40 Per
ISIP 885# FSIP 885#	370 370	Cem. 200 Sx 60-40 Poz.
Anh. 1177 (+900) Lansing 337 B. Sand3678(-1601) Granite 36	6 (-1299)	
Describe in detail the manner i	In which the well was all	, indicating where the mud fluid wa
placed and the method or method were used, state the charact	ods used in introducing it in	, indicating where the mud fluid wa to the hole. If cement or other plug
Ran cement plugs through dril	1 pipe from 1216' with 50 sx,	to the hole. If cement or other plug d, from feet to feet each set then 2nd plug from 390
(50' below surface) with 40 sx 40' on bridge to surface with	a curra prae in outdiace from	
(If additional descr	lption is necessary, use <u>BAC</u>	(of this form.)
Name of Plugging Contractor FO		License No. 8430
Address P. O. Box 133 (324 S.	3rd) Wakeeney, KS 67672	
STATE OF California	COUNTY OF San Luis Obispo	
D. C. Marchant, President		,534
above-described well, being fi	TST GUIV SWAPA AA AAPA cauca	oyee of Operator) or (Operator) o That I have knowledge of the facts
the same are true and correct,	so help me God.	above-described well as filed tha
	(Signature)_	COMandet -
OFFICIAL SEAL	(Address)	P. O. Box 1429, San Luis Obispo, CA
	SWORN TO before me this	day of January TEV 193406 STATE CORPURATION OF STATE CORPURATION
SAN LUIS OBISPO COUNTY My Comm. Expires Dec. 19, 1989	1 - Male V	4000
My Commission	Expires: /2/19/89	Notary Public 1988
1		CONSERVATION DIVISION

Wichita, KROFin CP-4
Revised 07-87