

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

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

API NUMBER 15-165-21,275-0000

LEASE NAME Wagner

WELL NUMBER 1

SPOT LOCATION NE/4 NE/4 SE/4

SEC. 12 TWP. 18S RGE. 19W ~~KXX~~ (W)

COUNTY Rush

Date Well Completed 12-16-84

Plugging Commenced 12-16-84

Plugging Completed 12-16-84

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

LEASE OPERATOR Sowle Exploration

ADDRESS Box 171, Phillipsburg, Ks. 67661

PHONE # (913) 543-2871 OPERATORS LICENSE NO. 6829

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

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

Which KCC/KDHE Joint Office did you notify? _____

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

Producing formation _____ Depth to top _____ bottom _____ T.O. 4217

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"	246.45'	0

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:

1st plug set @ 1270' w/50 sxs cement; 2nd plug set @ 640' w/40 sxs cement; 3rd plug set @ 380' w/50 sxs cement; 4th plug set @ 40' w/10 sxs cement; 10 sxs in rathole

cement was 60/40 pozmix, 2% gel, 3% cc
(If additional description is necessary, use BACK of this form.)

Name of Plugging Contractor Allied Cementing License No. _____
Address Box 678, Great Bend, Ks. 67530

STATE OF Oregon COUNTY OF Clatsop, 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) [Signature]
(Address) _____

SUBSCRIBED AND SWORN TO before me this 13th day of Feb., 1986

[Signature]
Notary Public
Form CP-4

My Commission expires: _____ My Commission Expires April 17, 1987

FEB 18 1986
2-18-86
CONSERVATION DIVISION