STATE OF KANSAS STATE CORPORATION COMMISSION

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

API NUMBER	15-101-21.697-000C
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130	S. 1	Mark	ket
Suit	te 20)78	
Wich	nita	KS	67202

TYPE OR PRINT NOTICE: Fill out completely and return to Coms. Div.

LEASE NAME Anderson Trust WELL NUMBER ____1 2310 Ft. from S Section Line

WICHILA NS (372.02	office within	30 days.	2310	_ Ft. from S	Section Line
.EASE OPERATOR_	Rheem Resources	Inc.		SEC. 33	TWP. 16 RGE	. <u>27</u> (E)or 🕢
ADDRESS 100 So.	Main Suite 505	Wichita Ks 6	7202-3738	COUNTY	Lane	
_ _	-5099 OPERATO				il Completed	<u> </u>
Character of We				Ptuggin	g Commenced	04-03-95
(011, Gas, D&A,	SWD, Input, Wate	er Supply Well)		Pluggin	g Completed	04-03-95
	oposal was approv			95		(date)
	ant					
	Yes 1f m					
	†lon					4 625
	thickness of all					
	TER RECORDS			•	80	
-	Content				Pulled out	
Surface -			Q 5/Q!!	10 its		••
Burrace						
· · · · · · · · · · · · · · · · · · ·				_	-	
plug from 870'- w/10 sks., 15 s	710' w/40 sks. 4 ks rathole, total	th plug from 300 235 sks, 60/40	posmix, 6%	gel, 2%co, 1	plug from 411 w/k# Floseal	per sk
Name of Pluggis	ng Contractor	Abercrombie R	D. Inc.		License No.	30684
	Main. Suite 801. J					
HAME OF PARTY	RESPONSIBLE FOR P	LUGGING FEES:	Rheem Resou	rces, Inc.		
STATE OF Kans		COUNTY OF			, ss.	
	Wharton			(Employee	of Operator)	or (Operator)
above-describe	d wall balag fir	st duly sworn o	n oath, say	s: That I	have knowled	ge of the fact
statements, a	nd matters here; rue and correct,	in contained and so help me God.			i	THE PERSON OF TH
	•	•	(Signatur	· o) Juck	- K lellensto	<u>~</u>
			(Address)	·		The state of
	SUBSCRIBED AND	SWORN TO before	_ zidt em er	10th day	ot apri	PAPAS, 19 95
自 DEBORAH K	AMMERMAN State of Kansas		1 Och	out	annen	na 1995
My Appt. Exp		~~		No	tary Public	· · · · · · · · · · · · · · · · · · ·
	The leader	Evnirae. J.	-1-46			"" A. (1)
	my Commission	Expires: 3-	-1-96			White Add Sag will he Form C
	लें के दिल्ला है जिल्ला	Expires:	-1-9ks		_	Form C Revised 05-

FURM C-1 //91

			FORM MUST BE TYPED	
Comments of the Comments of th	State of Kans		ALL BLANKS MUST BE FILLED	
DISTRICT # 4/ SGA?YesV.No Must be app		e (5) days prior to commer		
		•		
Expected Spud Date March 25	1995	NW SE Sec	33 Twp 16 s, Rg 27 🕱 West	
month day	year			
31283		feet	from South / Middel Line of Section	
OPERATOR: License # ResourcesThe		2,310 feet	t from East /XMest line of Section R IRREGULAR?	
2111 + A 505 100 C	hiith Main		the Section Plat on Reverse Side)	
Address: Wichita, KS 6	7202-3738	County: Lane	the section read on Reverse side)	
Contact Person: Clay Hedrick,	Jr.	Lease Name: Anderso	on Trustil #- 1	
Phone: 316-262-5099		Field Name:		
	* 2	Is this a Prorated/Space	ed Field? City es .X no	
CONTRACTOR: License #		Target Formation(s):	misas citt	
Name: Abercrombre brilling	A TIIC .	Nearest lease or unit bo	oundary: 330	
		<u></u>	n: 2700 feet MSL	
Well Drilled For: Well Class:	Type Equipment:	Water well within one-qu	•	
X. Oil Enh Rec Infield	X. Mud Rotary		within one mile: yes no h water:	
Gas Storage Pool Ext.	Air Rotary		le water: /300.	
OWWO Disposal Wildcat	Cable	Surface Pipe by Alternat	te:1 . X 2	
Seismic; # of Holes Other		Length of Surface Pipe F	Planned to be set: 275 of 8	5
Other		Length of Conductor pipe	e required:	
If OMMO: old well information as follows:		Projected Total Depth: .		
Operator:		•	h: Wississippian	
Well Name: Old Total De		Water Source for Drillin	ng Operations: well farm pond X other	
tomp. Date	A.:	•	wett rarm pond z other	
Directional, Deviated or Horizontal wellbor	e? yes 👗 . no	Will Cores Be Taken?:	yes ^X no	
If yes, true vertical depth:		If yes, proposed zone:		
Bottom Hole Location		_	200' Alt. II REq.	
Exp. 9/3/95	AFFIDAVIT	•		
Exp. 3/3/33		-		
The undersigned hereby affirms that the dril	***************************************		ell will comply with K.S.A. 55-101,	
The undersigned hereby affirms that the dril et. sec.	lling, completion and eve		ell will comply with K.S.A. 55-101,	
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STATE OF KANSAS KANSAS CORPORATION COMMISSION CONSERVATION DIVISION 130 South Market - Room 2078 Wichita, Kansas 67202

FORM CP-1 (3/92)

WELL PLUGGING APPLICATION FORM (PLEASE TYPE FORM and File ONE Copy)

API # 15-101-21,697-0000 (Identifier number of this well). This must be listed for wells drilled since 1967; if no API# was issued, indicate spud or completion date.	
WELL OPERATOR Resources, Inc. KCC LICENSE # 31283 (owner/company name) (operator's)	
ADDRESS 100 So. Main, Suite 505 CITY Wichita (operator's)	
STATE Kansas ZIP CODE 67202-3738 CONTACT PHONE # (316) 262-5099	
LEASE Anderson Trust WELL# 1 SEC. 33 T. 16 R. 27 (**EAS**/West)	
- NW - NW - SE SPOT LOCATION/QQQQ COUNTY Lane	
2310 FEET (in exact footage) FROM N (circle one) LINE OF SECTION (NOT Lease Line)	
FEET (in exact footage) FROM E/W (circle one) LINE OF SECTION (NOT Lease Line)	
Check One: OIL WELL GAS WELL D&A X SWD/ENHR WELL DOCKET#	
CONDUCTOR CASING SIZE SET AT CEMENTED WITH SACKS	
SURFACE CASING SIZE 8 5/8" SET AT 284.70' CEMENTED WITH 190 SACKS	
PRODUCTION CASING SIZE SET AT CEMENTED WITH SACKS	
LIST (ALL) PERFORATIONS and BRIDGEPLUG SETS:	
ELEVATION 2693/2698 T.D.4625' PBTD ANHYDRITE DEPTH 2124'-2158' (Stone Corral Formation)	
CONDITION OF WELL: GOOD X POOR CASING LEAK JUNK IN HOLE	
PROPOSED METHOD OF PLUGGING Fill w/heavy mud; 1st plug at 2150' with 50 sks., 2nd plug at	
1315' with 80 sks., 3rd plug at 870' with 40 sks., 4th plug at 300' with 40 sks., 5th	
plug at 40' with 10 sks., 15 sks rathole, total 235 sks 60/40 pos, 6% gel, 2%cc, 端flosea (If additional space is needed attach separate page)	ıl/sk
IS WELL LOG ATTACHED TO THIS APPLICATION AS REQUIRED? IS ACO-1 FILED?	
If not explain why? Sent to operator to file.	
PLUGGING OF THIS WELL WILL BE DONE IN ACCORDANCE WITH K.S.A. 55-101 et. seg. And the RULES AND REGULATIONS OF THE STATE CORPORATION COMMISSION.	
LIST NAME OF COMPANY REPRESENTATIVE AUTHORIZED TO BE IN CHARGE OF PLUGGING OPERATIONS:	
Tony Martin PHONE# (316) 262-1841	
ADDRESS 150 N. Main, Suite 801 City/State Wichita, Ks. 67202	
PLUGGING CONTRACTOR Abergrombie RTD, Inc. KCC LICENSE # 30684	
(company name) (contractor's) ADDRESS 150 N. Main, Ste 801, Wichita, Ks. 67202 PHONE # \$16) 262-1841	
PROPOSED DATE AND HOUR OF PLUGGING (If Known?) 04-03-95 5:00 p.m.	
PAYMENT OF THE PLUGGING FEE (K.A.R. 82-3-118) WILL BE GUARANTEED BY OPERATOR OR AGENT	
DATE: 04-06-95 AUTHORIZED OPERATOR/AGENT: Carlo Menden (signature) Vice President	13500