

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

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

API NUMBER 15-077-20,393-00-00

LEASE NAME Sanders "B"

WELL NUMBER #1

1980' Ft. from S Section Line

1980 Ft. from E Section Line

SEC. 4 TWP. 31S RGE. 8 (E)(W)

COUNTY Harper

Date Well Completed 12-30-76

Plugging Commenced 3-26-86

Plugging Completed 3-26-86

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

LEASE OPERATOR TXO Production Corp.

ADDRESS 155 N. Market, #1000, Wichita, KS. 67202

PHONE# (316) 269-7600 OPERATORS' LICENSE NO. 5171

Character of Well Oil

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

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

Which KCC/KDHE Joint Office did you notify? Unknown

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

Producing Formation _____ Depth to Top _____ Bottom _____ T.D. 4461'

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			8-5/8"	279'	
	Production			4-1/2"	119 jts.	

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.
Pumped 1 sk hulls + 35 sxs Thixotropic. Followed w/ plug & wireline. Plug stopped @ 2277'.
RU Jenkins Wireline & perf 4-1/2" csg @ 300' w/ 2 JSPF using Link Jet Shots (Total 5 holes).
Pumped 105 sxs 50/50 poz w/ 6% gel. Circulate cement to surface. Plugging complete @ 12:30 p.m. on 3-26-86.

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

Name of Plugging Contractor Clarke Oilfield Services License No. 5105

Address 107 W. Fowler, Medicine Lodge, Kansas 67104

STATE OF _____ COUNTY OF _____, 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 before me, I, _____, Notary Public, do hereby certify.
STATE CORPORATION COMMISSION

MAY 14 1986

(Signature) Jeffrey S. Childs

(Address) Jeffrey S. Childs
155 N. Mkt., #1000, Wichita, KS 67202

CONSERVATION DIVISION
WICHITA, KANSAS

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

Connie F. Koehler

Notary Public

My Commission Expires: July 10, 1988

Connie F. Koehler
NOTARY PUBLIC
State of Kansas
MY APPT. EXPIRES 7/10/88

Form CP-4
Revised 08-84