STATE OF KANSAS 2

WELL PLUGGING RECORD

ARI NUMBER 007-21936 -0003

· o	CE: Fill out con	-	LEASE N	AME Hinz
· o	CE: Fill out con	_		
· o		TYPE OR PRINT		MBER
	and return to Cons. Div. office within 30 days.		-660	Ft. from S Section Line
			_1980	_ Ft. from E Section Line
LEASE OPERATOR Westmore Brilling Co).		SEC - 15	TWP. 325 RGE.14 (E/)or(W)
ADDRESS Box 347 Medicine Lodge, Ks. 67104			COUNTY	Barber
PHONE#(316, 886-3112 OPERATORS LICENSE NO.			Date We	II Completed 10-31-84
Character of Well oil			Pluggin	g Commenced 8-20-88
(Q11, Gas, D&A, SWD, Input, Water Supply Well)				g Completed 8-30-88
Did you notify the KCC District Off	ice prior to plu	ugging th	nis_well?	yes
Which KCC Office dld you notify?	odge City	STAT	RECEIVE E CORPORATION	ED .
Is ACO-1 filed? If not,	Is well log at	tached?	8-31-	88
Producing Formation Miss		D		1988 _{T.D.} 4490
Show depth and thickness of all wat				
OIL, GAS OR WATER RECORDS			Wichita, Kans	eac .
Formation Content	From To	Slze	Put In	Pulled out
	— I ————— I ——— I -	8 5/8	268	none
		4 1/2	4062	3000
Describe in detail the manner in whe placed and the method or methods under used, state the character of Sand from 4026 to 3900-45sacks compared to 50 sacks cement-110 sacks geli-1	sed in introduct f same and dep ement dump baile	ing it in th place er-BJ pumj	ito the ho ed, from p top 4 sa	le. If cement or other plu feet to feet each se Cks Hulls 10 sacks Coll-
Steve Pifter and Elmo Morgenster	n on location.			0,0 <u>ye</u> ±±.
Name of Plugging Contractor Clarke	Corporation	, use BAC	_	form.) _icense No5105
Address Box 187 Medicine Lodge, Ks.	$\overline{()}$)		
STATE OF C	OUNTY OF	Losos		_, s s •
	duly sworn on oa	ath, says	: That i h	Operator) or (Operator) have knowledge of the fact scribed well as filed th
above-described well, being first statements, and matters herein cont the same are true and correct, so he KOTARY FUELLO - STATE OF FUELLO - STATE OF FUELLO - STATE OF FUELLO - STATE OF FUELLO - S	ained and the lo elp me God. (Si	ignature) ddress)	Elm I 30 day o	May and and
statements, and matters herein cont the same are true and correct, so he KOTARY FlockS - State of Kansas CAREN J. WINCHELL My Appt Exp.	ained and the lo elp me God. (Si	ignature) ddress)	Clary of day of the state of th	Moyosla.

Form CP-4 Revised 07-86