STATE OF KANSAS STATE CORPORATION		WELL PLU K.A.R8	GG ING RECOR 2-3-117		Number 15-	-007-21 , 756-000	
200 Colorado Derby Wichita, Kansas 6			••	LE	ASE NAME_ Jur	ne Donovan	
		TYPE OR		WE	LL NUMBER 1-	-23	
	NOTICE: Fill out completely and return to Cons. Div.			1 y SP	SPOT LOCATION NE-NE-NE		
		ffice withi	n 30 days.	SE	C. <u>23</u> TWP. <u>32</u> F	RGE. <u>11</u> MEXICOT (W	
LEASE OPERATOR KE	3W Oil & Gas Co.		•	CO	UNTY Barber		
ADDRESS 3632 N.W. 51st St., Suite 205, Oklahoma City, OK 73112					Date Well Completed 1/28/84		
PHONE # (405) 947-1238 OPERATORS LICENSE NO. 5993					Plugging Commençed 1/3/86		
Character of Well (Oil, Gas, D&A, Sw	Oil /D, Input, Water S	upply Well)		PI	ugging Comple	ited <u>1/9/86</u>	
Did you notify the	KCC/KDHE Joint D	istrict Off	ice prior t	o plugging	this well?	yes	
Which KCC/KDHE Joi	nt Office did you	notify?	Dodge Cit	y, KS		· · · · · · · · · · · · · · · · · · ·	
Is ACO-1 filed? Y	es If not,	is well lo	g attached?				
Is ACO-1 filed? Y Producing formation Show depth and thi	Toronto (Dougl	as) Depth t	o top <u>3627</u>	bot	tom 3663 87472	P. ASOLO	
Show depth and thi	ckness of all wat	er, oll and	gas format	ions.		1-14 COMMI	
OIL, GAS OR WATER	RECORDS			CASING R		- 3 JUDA	
Formation	Content	From T	o Size	Put in	Pulled on	TYATION DIVISION	
Indian Cave (Admir	e) gas & water	2584 26	16 8 5/8	267	None	Kansas	
Toronto (Douglas)	oil & water		63 5 1/2	3709	2074		
Describe in detail	the manner in wh	ich the wel	l was plugg	ed, indica	ting where		
the mudifluid was the hole. If cemen	placed and the me it or other plugs	thod or met were used s	hods used i tate, the c	n introduc haracter o	ing it into f same and		
depth placed, from	feet to feet	each set.	Plug back 36	SR3 cand f	From 3683 to 1		
4sx cement from 35 plug, 100sx cement	28 cc, 60-40 POZ	Z, 6% Jell	(B J Hughes	s pumping)	SSX Jell, Is	sx hull,	
			* * Trans.			· · · · · · · · · · · · · · · · · · ·	
Jack Luthie and E.				4 5			
(If add	litional description	on is neces	sary, use B	ACK of this	s form.)	•	
Name of Plugging C	ontractor Clarke	Corp.	4		_License No	5105	
Address P.O. Box	167. Medicine Lodo	je, KS 6/IU	4				
							
STATE OF Kansas	C(OUNTY OF	Barber		,ss.		
Elmo Morgenstern			(empl	oyee of ope	erator) or		
(operator) of abov	e-described well, f the facts, state	being tirs ements. and	t duly swor matters her	n on oath, rein contai	says: That ined and		
the log of the abo	ve-described well	as filed t	hat the sam	e are true	and		
correct, so help m	e God.		(Signa	ature) Ed	mil Horse	riter)	
	- State of Kansas		(Addr	ess) <u>M</u>	edicine Lodge	e, KS 67104	
7 Table 1	J. WINCHELL LL-급급-용기 UBSCRIBI	ED AND SWOR	N TO before	me this 10	_day of Janua	ary , 19 <u>86</u>	
				ien ()	Dinchel	\mathcal{D}	
My Commission i	T	.05	<u> </u>	(/ Nc	PIATY PUBLIC		

Form CP-4 Revised 01-84