WELL PLUGGING RECORD STATE CORPORATION COMMISSION API NUMBER 15-007-01033-00-01 K.A.R.-82-3-117 200 Colorado Derby Building Wichita, Kansas 67202 LEASE NAME Skinner WELL NUMBER 2 TYPE OR PRINT NOTICE: FILL out completely and return to Cons. Div. 4290 Ft. from S Section Line office within 30 days. 990 Ft. from E Section Line LEASE OPERATOR Farrar Pump & Supply Company SEC. 2 TWP 31 RGE. 14 XXXX F(W) ADDRESS Junction Hwy 160 & 280, Medicine Lodge, KS 67104 COUNTY Barber PHONE# ( 316) 886-3763 OPERATORS LICENSE NO. 3399 Date Well Completed 1-6-46Character of Well \_\_good\_\_\_ Plugging Commenced 3-27-93 (Oll, (Gas), D&A, SWD, Input, Water Supply Well) Plugging Completed  $\underline{6-18-93}$ The plugging proposal was approved on March 29, 1993 (date) by Richard Lacey, Steve Pfeifer (KCC District Agent's Name). Is ACO-1 filed? ves If not, is well log attached? Producing Formation <u>N/A</u> Depth to Top\_\_\_\_\_\_ Bottom\_\_\_\_\_T.D.\_\_\_\_ Show depth and thickness of all water, oil and gas formations. OIL, GAS OR WATER RECORDS CASING RECORD Formation Content From Put In To Size Pulled out 8 5/8 900 None 5 1/2 4373 2400 Describe in detail the manner in which the well was plugged, indicating where the mud fluid w placed and the method or methods used in introducing it into the hole. If cement or other plu were used, state the character of same and depth placed, from feet to feet each se Sanded off bottom to 4367, 5sx cement, pumped 300 hulls, 10 gell, 150 cement, 10 gell, 100 hulls, 100 cement, 60-40 POZ, 6% (If additional description is necessary, use BACK of this form.) Name of Plugging Contractor <u>Clarke Corporation</u> \_\_\_\_\_ License No. 5105 Address P.O. Box 187, Medicine Lodge, KS 67104 NAME OF PARTY RESPONSIBLE FOR PLUGGING FEES: \_\_\_\_\_ Farrar Pump & Supply Company STATE OF Kansas \_\_\_\_\_ COUNTY OF Barber Jeff Sletto (Employee of Operator) or (Operator) above-described well, being first duly sworn on oath, says: That I have knowledge of the fact statements, and matters herein contained and the log of the above-described well as filed tr the same are true and correct, so help me God. E AG- RECEIVED (Signature) GLENDA MORRISON NOTARY PUBLIC STATE CORPORTION COMMISSION STATE OF KANSAS (Address) Medicine Lodge, KS 67104 2. My Appt. Exp. Aug. 17, 1994 SUBSCRIBED AND SWORN TO before me this 29 day of June CONSERVATION DIVISION Notary Public Misinta, Kansas My Commission Expires:\_\_Aug.\_17, 1994

STATE OF KANSAS