STAT	E OF	KAN	SAS	•	
STAT	E COF	POR	NO I TA	COMM	ISSION
200	Color	ado	Derb	y Bul	ding
VI ch	Ita.	Kans	. 28.5	67202	

## WELL PLUGGING RECORD

PI NUMBER	15 <b>-007</b> -21-122	-0000

2 <b>00</b> Co <b>lorado Derby Bu</b> Hi <b>chita, Kansas</b> 6720			-82-3-117	API NUMBER 15-007-21-122-CCC
				LEASE NAME Kaiser
			OR PRINT	WELL NUMBER 1
	a	nd return	to Cons. D	IV. NE SE Ft. from S Section Line
•			thin 30 days	Ft. from E Section Line
EASE OPERATOR KBW	Oil & Gas Co.			SEC.36 TWP.325 RGE. 9 LEJOP W
DDRESS PO Box H Bet	hany Okl. 730	800		COUNTY Harper
HONE # ( 405 789-0178	OPERATORS	LICENSE 1	NO. 5993	Date Well Completed 1988
haracter of Well	depleted			Plugging Commenced $11-29-89$
Oll, Gas, D&A, SWD,	Input, Water	Supply Wel	l <b>()</b>	Plugging Completed $12-1-89$
Id you notify the KC	CC District Of	fice prior	to plugging	this well? yes
hich KCC Office did	you notify?	wichi	ta	
s ACO-1 filed? X	If, not	, is well	log attached	17X
			-1.	Bottom T.D. 3755
how depth and thickn	ness of all wa	ter, oll a	and gas forma	at lons.
OIL, GAS OR WATER RE		1		0.4.0.4.10.4.0.5.0.5.0.5.0.5.0.5.0.5.0.5.0.5.0.5.
Formation Co	ontent	From	To Size	Put In Pulled out
	<del></del>		8-5	78 262 STATE CONFORM TO THE PROPERTY OF THE PR
			4 1	$\frac{72}{3754}$
	<del></del>			
ascribe in detail th			_	G HOO
escribe in detail the laced and the methodere used, state the sand from 2837 to 880 spot 35 sx pull	ne manner in wild or methods in e character (co. 2730 4 sx diction 260 cir ce	nich the pused in in of same a mp bailor ement to t	well was plug itroducing li and depth plushot put shot put op pullaall	gged, indicating whose the mudfluid into the hole. If it is the mudfluid aced, from feet to the placed, from feet to the same built to the casing to 1380 spot has built to
660 spot 33 sx pill	to 200 CIF Ce	ement to t	op pullaaii	linto the hole. If it was or other placed, from feet to 1380 spot space built to casing.
(If additi	onal descript	on Is nec	cessary, use	Into the hole. If the day or other placed, from feet to the first fill to the second to 1380 spot 500 x pull to casing.  Elmo and Van Geesen on location  BACK of this form.)
(if additi	onal descript	on Is necessary	ion	Into the hole. If it is a constant of the placed, from feet to the place of the stant of the place of the pla
(If addItI ame of Plugging Cont ddress PO Box 187)	onal descript	on Is necessary Corporates, Ks 671	cessary, use ion	Into the hole. If the how or other placed, from feet 1380 spot spot spot spot spot spot spot spot
(If addITI ame of Plugging Cont ddress PO Box 187 I	onal descript	on Is necessary	essary, use ion 04	Into the hole. If the day or other placed, from feet 1880 spot spot spot spot spot spot spot spot
(If addITI ame of Plugging Cont ddress PO Box 187)  TATE OF Kansas  Elmo R. Morgen bove-described well tatements, and matte	onal descript  ractor Clarke  Medicine Lodge  stern , being first  ors herein conf	on Is necessary of the County	cessary, use ion 04 Barb	er
(If addItI ame of Plugging Cont ddress PO Box 187 I  TATE OF Kansas  Elmo R. Morgen bove-described well tatements, and matte	onal descript  ractor Clarke  Medicine Lodge  stern , being first  ors herein conf	on Is necessary of the County	essary, use ion  04  Barb  n on oath, s the log of	er
(If addItI ame of Plugging Cont ddress PO Box 187 I  TATE OF Kansas  Elmo R. Morgen bove-described well	onal descript  ractor Clarke  Medicine Lodge  stern , being first  ors herein conf	on Is necessary of the County	cessary, use ion 04 Barb	er
(If addITI ame of Plugging Cont ddress PO Box 187)  TATE OF Kansas  Elmo R. Morgen bove-described well tatements, and matte he same are true and	onal descript  ractor Clarke  Medicine Lodge  stern , being first  ors herein conf	on is ned e Corporate, Ks 671 COUNTY OF duly swort ained and neip me Go	op pullaali eessary, use ion 04 Barb in on oath, s the log of d. Signatu	er ,ss.  (Employee of Operator) or (Operator) says: That I have knowledge of the factor of the above-described well as filed the same of t

Nunc 21 1994

PAMELA RICKE NOTARY PUBLIC STATE OF KANSAS Wy Appt. Exp. 10-11-91

My Commission Expires:

Form CP-4 Revised 07-86