

LEASE NAME Stucky

WELL NUMBER #1

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

3630 Ft. from S Section Line

2970 Ft. from E Section Line

SEC. 8 TWP. 31 RGE. 14 (East of 14)

EASE OPERATOR Apollo Energies, Inc

ADDRESS RR 1 Box 60 Kingman, Ks 67068

COUNTY Barber

PHONE(S) (316) 532-2390 OPERATORS LICENSE NO. 30481

Date Well Completed 10-81

Character of Well OIL

Plugging Commenced 2-4-92

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

Plugging Completed 2-5-92

The plugging proposal was approved on 10-10-91 (date)

by Steve Pfeiffer (KCC District Agent's Name)

is ACO-1 filed? Yes If not, is well log attached?

Producing Formation Viola/Arbuckel Depth to Top 4399 Bottom 4406 T.O. 4625

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
<u>Viola</u>	<u>oil Gas Water</u>	<u>4399</u>	<u>4406</u>	<u>4 1/2"</u>	<u>4623</u>	<u>3490'</u>
<u>Arbuckel</u>	<u>oil + water</u>	<u>4582</u>	<u>4586</u>			

Describe in detail the manner in which the well was plugged, indicating where the mud fluid placed and the method or methods used in introducing it into the hole. If cement or other were used, state the character of same and depth placed, from feet to feet each
Pump down 8 5/8" 300 # Halls 105# Gel, 50 sk 60/40 Poz Cmt, 6% Gel, 10 sk Gel, 100 # Halls, 8 5/8" Plug, 100 sk 60/40 Poz Cmt 6% Gel
MAX PRESS 800# 51 C 300 #

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

Name of Plugging Contractor CLARKE CORP License No. 5105

Address 106 West Fowler Medicine Lodge, Ks, 67104

NAME OF PARTY RESPONSIBLE FOR PLUGGING FEES: Apollo Energies, Inc

STATE OF KANSAS COUNTY OF Kingman, ss.

RECEIVED
STATE COMMISSION
NOV 17 1992

(Employee of Operator) or (Operator) above-described well, being first duly sworn on oath, says: That I have knowledge of the above-described well as filed statements, and matters herein contained and the log of the above-described well as filed the same are true and correct, so help me God.

(Signature) [Signature]
(Address)

SUBSCRIBED AND SWORN TO before me this 16th day of November, 1992

[Signature]
Notary Public

My Commission Expires: August 27, 1993

