STATE OF KANSAS STATE CORPORATION	COMMISSION	K.A.R.			AP1 NUM	AP1 NUMBER 15-007-22,418-00-00		
200 Colorado Derby Wichita, Kansas 6					LEASE N	NAME Alexa	nder	
j	v			INT		JMBER1-3	36	
	ית	OTICE: FIII and return	n to (	Cons. Div.	1980	Ft. from S	S Section Lin	
		office wit	/him /	50 days.		ft. from f	E Section Lin	
LEASE OPERATOR H	dinkle Oil Comp	anv			<del>-</del>		E15_(E)or(W	
	ADDRESS 150 N. Main, Suite 1016 Wichita, KS 67202							
PHONE#( 316 _ 267-02	Date We	li Completed	08-31-93					
	Character of Well D&A					ig Commenced		
(OII, Gas, D&A, SW	<del></del>	r Supply Wei	, [ ]		Pluggin	g Completed	08-31-93	
The plugging propo	sai was approv	ed on <u>08-2</u>	28-93			•		
by Richard Lacey							(gent's Name)	
is ACO-1 filed? Y							<del></del>	
Producing Formation				_			<b>4900'</b>	
Show depth and this						/···	~~ <u></u>	
OIL, GAS OR WATER		1			CASING RECOR	RO		
	Content	From	TTO			Pulled out		
Рогие	Con i will			ľ	Put in	Pulled		
-			1					
		•						
Describe in detail placed and the met were used, state Bottom Plug:	the manner in thod or methods the character (800 w/50 sa	tni ni besy a	trodu	ucing it is	into the hol	le. If cement	t or other p	
Next Plug: @	520 W/50	cks cement	nru u	rill pape			•	
Top Plug: @ a	40' w/10 ''	W	<u></u>	11 11				
1) Sacro II,	athole			<u> </u>				
Name of Plugging Co	ontractor	Duke Drillin	g Co.	, Inc.		_icense No	5929	
Address P.O. Box	<del></del>							
NAME OF PARTY RESPO				INKLE OIL	COMPANY			
STATE OF KANSAS		_ COUNTY OF _			•	_, 55.		
ORVIE HOWELL				( E	Employee of	r f Operator) o	or ( <del>ŭp<u>j</u>akato</del> k)	
above-described well statements, and m the same are true a	il, being first matters herein and correct, so	ne benistnoo	nd the	ath, says:	the about	ve knowledge	e of the fac	
MELANIE FRI NOTARY PUE STATE OF KAI My Appl. Exp.	BLIC MBAS	,	()	Address)	150 N. MAIN	N, #1016, WIC	מונים מונייי	
SI	DESCRIPED AND S			M	clanie)	Inich	5 1993	
USE ONLY ONE	y Commission Ex SIDE OF EACH	pires: FEBRU	JARY	10, 1996		Fy Full (	Wichita Kansas	

USE ONLY ONE SIDE OF EACH FORM

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Form CF Revised 05-