

15-007-30265-0000

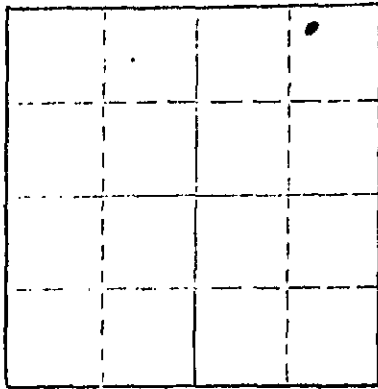
STATE OF KANSAS  
STATE CORPORATION COMMISSION

Form CP-4

Give All Information Completely  
Make Required Affidavit  
Mail or Deliver Report to  
Conservation Division  
State Corporation Commission

WELL PLUGGING RECORD

P. O. Box 17027  
Wichita, Kansas 67217  
NORTH



Locate well correctly on above  
Section Plat

Barber County, Sec. 12 Twp. 35 Rge. 14 (E) (W)  
Location as "NE/CNWSW" or footage from lines NW-NE-NE  
Lease Owner DON RIDER  
Lease Name Sternberger Well No. 4  
Office Address 104 W Lockwood - Med. Lodge, Kansas  
Character of Well (completed as Oil, Gas or Dry Hole) GAS  
Date well completed 1956 19  
Application for plugging filed Feb 1974  
Application for plugging approved Feb 8 1974  
Plugging commenced 19  
Plugging completed 2 PM - Feb - 28 1974  
Reason for abandonment of well or producing formation  
None Commercial  
If a producing well is abandoned, date of last production Dec 1973  
Was permission obtained from the Conservation Division or its agents before plugging was commenced? Yes

Name of Conservation Agent who supervised plugging of this well E Russell Biberstein  
Producing formation MISS Depth to top Bottom Total Depth of Well 4970 Feet  
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
MISS	GAS		4890	8 3/4 5 1/2	346 4970	NONE 4000'

Describe in detail the manner in which the well was plugged, indicating where the mud fluid was placed and the method or methods used in introducing it into the hole. If cement or other plugs were used, state the character of same and depth placed, from feet to feet for each plug set.

Plugged @ Follows

SAND TO 4800 FT. 5 SRS CEMENT W/ BAKER  
PULLED 5 1/2" Casing 4000' SET 10" ROCK BRIDGE  
@ 250' FILL. HOLE W/ 4 yd RED MUD TO SURFACE

RECEIVED  
STATE CORPORATION COMMISSION

APR 16 1974  
E-16-74  
CONSERVATION DIVISION  
Wichita, Kansas

Name of Plugging Contractor RUSSELL CASING PULLING INC  
Address

STATE OF \_\_\_\_\_ COUNTY OF \_\_\_\_\_ ss.

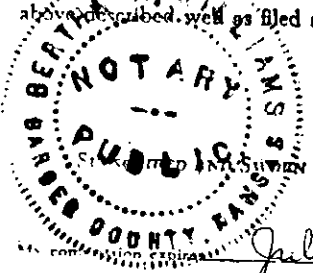
(employee of owner) or (owner or operator) of the above-described well, being first duly sworn on oath, says: That I have knowledge of the facts, statements, and matters herein contained and the log of the above-described well as filed and that the same are true and correct. So help me God.

(Signature) Don C. Rider  
104 W Lockwood Med. Lodge, KS  
(Address)

to before me this 15th day of April, 1974

Bertha M. Williams

Notary Public.



July 15, 1975