

STATE OF KANSAS  
STATE CORPORATION COMMISSION  
200 Colorado Derby Building  
Wichita, Kansas 67202

WELL PLUGGING RECORD  
K.A.R.-82-3-117

API NUMBER. 15-007-21,703-0000

LEASE NAME Lilliequist

WELL NUMBER 2-28

       Ft. from S Section Line

       Ft. from E Section Line

260' W & 185' N of C NW SE  
SEC. 28 TWP. 30 RGE. 12W (E) or (W)

COUNTY Barber

Date Well Completed       

Plugging Commenced 12-8-87

Plugging Completed 12-29-87

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

LEASE OPERATOR Texas Energies, Inc.

ADDRESS P.O. Box 947  
Pratt, Kansas 67124

PHONE# (316) 672-7838 OPERATORS LICENSE NO. 5087

Character of Well Gas

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

Did you notify the KCC District Office prior to plugging this well? Yes

Which KCC Office did you notify? Dist. #1 Dodge City, Kansas

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

Producing Formation        Depth to Top        Bottom        T.D. 4650'

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
				8-5/8"	331'	none
				4-1/2"	2922'	2460'

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 each set.

Plugged off bottom with sand to 2750' and 4 sacks cement. Shot pipe @ 2460', pulled a total of 60 joints of 4-1/2" casing. Plugged surface with 4 hullo, 10 gel, 50 cement, 1 hull, 10 gel, 100 cement, 60/40 pos, 6% gel.  
Plugging Complete

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

Name of Plugging Contractor Kelso Casing Pulling, Inc. License No. 6050 RECEIVED  
KANSAS STATE CORPORATION COMMISSION

Address P.O. Box 347 Chase, Kansas 67524

STATE OF Kansas COUNTY OF Rice, ss.

Mike Kelso, Vice-President (Employee of Operator) or (Operator) of 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 that the same are true and correct, so help me God.

(Signature) Mike Kelso

(Address) Box 347 Chase, Kansas 67524

SUBSCRIBED AND SWORN TO before me this 30th day of December, 19 87

Irene Hoover  
Notary Public

My Commission Expires:       

