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
212 No. Market

WELL PLUGGING RECORD

Wichita, Kansas 67202	Location as "N				SE SE S	SE	
NORTH	I care Couner	Legge Cymer Robert L. Austin					
	Lease Name Harrell Well No. #8 Office Address Box 159 Stafford, KANSAS Character of Well (completed as Oil, Gas or Dry Hole)						
	Office Address	Office Address Box 159 Stafford, KANSAS					
	i .	, -	es Oil, Gas o	or Dry Hole) _			
	Date well com	Date well completed 19 Application for plugging filed 19					
	Application for	Application for plugging filed 19 Application for plugging approved 19					
		Plugging commenced 12=31=71 19					
	Plugging comp	leted	····		72	19	
	Reason for aba	ndonment of wel	l or producir	ng formation			
					 		
						19	
Locate well correctly on above Section Plat	menced?	n optamed from	the Conser	vation Division	or its agents be	efore plugging was com-	
Name of Conservation Agent who su	pervised plugging of th	is well		G. R. B	iberstein		
Producing formation		Depth to top	Botto	m	Total Depth o	f Well 4230 Feet	
Show depth and thickness of all wat	er, oil and gas formatio	ns.	,			. '	
OIL, CAS OR WATER RECOI	RDS	•				CASING RECORD	
FORMATION	CONTENT	FROM	ТВ	SIZE	PUT IN	PULLED OUT	
PURMATION	CUNIENI	FRUM	10	5 1/2"	431.9°	2346.74	
		<u> </u>		8 5/8"	431.9	E340.14'	
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dump bailer. Plugged hole with cellar.	3 sacks hulls				cement to) base of	
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	(If additions	description is neces	saury, use BAC	K of this sheet)	· · · · · · · · · · · · · · · · · · ·		
•	Southwest Casi						
Address	Box 364, Grea	t Bend, Kar	nsas				
STATE OF Kansas	, cot	JNTY OF	Barton		, ss.		
Southwest Casing	Pulling Co.	(employee of	owner) or (ow	ner or operator	of the above-described	
well, being first duly sworn on oath	ı, says: That I have kr	nowledge of the	facts, statem	ents, and matte	ers herein conta	ined and the log of the	
above-described well as filed, and th	at the same are true a	nd correct. So h	relo me God	. 0	1	D	
	Ly.	(Signature)	<u> W</u>	J. Sps	ncer	Lec.	
ション いた		•	Box 36	4 Great B	end, Kansa	ls	
				•	(Address)		
SUBSCRIBED AND SWORN TO DE	fore me this7	day of_	Janu	ary	, 19_	72	
7). 9. 2 /8	111		5.	drum ?	Mill	u	
My commission expires	Elsbu 19.	72		O.		Notary Public.	