STATE OF KANSAS STATE CORPORATION COMMISSION

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

15-033-20,318 API NUMBER

Form CP:

200 Colorado Derby Building Wichita, Kansas 67202 TYPE OR PRINT					<u></u>		
				LEASE N	LEASE NAME L.W. Rhodes		
				WELL NU	WELL NUMBER 3		
	NOTICE: Fill out <u>completely</u> and return to Cons. Div.				4620 Ft. from S Section Line		
office within 30 days.			1980	1980 Ft. from E Section Line			
LEASE OPERATOR Bishop Operating Company Inc.				SEC. 14	SEC. 14 TWP. 34 RGE. 20 KEXX (W)		
ADDRESS P.O. Box 1807, Hutchinson, KS				COUNTY	COUNTY Comanche		
PHONE# (316) 662-6445 OPERATORS LICENSE NO. 30972					Date Well Completed N/A		
Character of Well good				Pluggin	Plugging Commenced 5_12_93		
(Oil, Gas, D&A, SWD, input, Water Supply Well)				Plugging	Plugging Completed 6-19-93		
The plugging proposal was ap	proved on <u>5-</u>	12-93	····	- -	(da	a†e)	
by Steve Middleton, Richard Lacy					(KCC District Agent's Name).		
Is ACO-1 filed? yes	_ _if not, is well	log a	ttached?_				
Producing Formation	Depth	to T	ор	Botte	omT.D.		
Show depth and thickness of							
OIL, GAS OR WATER RECORDS	1	_	(CASING RECO	RD		
			· · · · · · · · · · · · · · · · · · ·				
Formation Content	From	To	Siže	Put In	Pulled out		
		-\	8 · 5/8	772	none 3300		
		<u> </u>	5 1/2	4861	3300		
		_		1 1 1 1 1 1 1	1 2 11 2 2 4 2 2 2 2 2 2 2 2 2 2 2 2 2 2		
Describe in detail the manner placed and the method or me	or in which the wathods used in it	reii w itrodu	as plugge cing it i	nto the ho	ing where the mud flu ie. If cement or other	ld rpl	
were used, state the char							
Sanded to 3450, dumped 5sx c 50sx cement, 10 gell, 100 hu) hulls, 10 gell.		
(If additional de	scription is nec	essar	y, use BA	CK of this	form.)		
Name of Plugging Contractor			· ·				
					LICONSO NO. 3103		
Address P.O. Box 187, Medic	•			-1 Ou h	.2		
NAME OF PARTY RESPONSIBLE FO				shop Operat			
	COUNTY OF	Dai			_,55.		
<u>Jeff Sletto</u> above-described well, being	first duly swor	000			f Operator) or (Opera		
statements, and matters h	erein contained a	and th					
the same are true and corre	ct, so help me Go	od.	Signature	a Osh	Commence of		
GLENDA MORRISON NOTARY PUBLIC				OM	Lodge STRS 67104 7-1-	كخ ب روائ≀	
STATE OF KANSAS My Appl. Exp. Aug. 17, 1994		(Address)	Medicine i	دوور 1 - 1104 مرود Loage		
SUBSCRIBED	AND SWORN TO be	fore · n	ne this 3	0 day	of June JUL - 1 1993		
		_	\mathcal{N}	en Da	Managery ATION DIVISIO	M.	
My Commiss	ion Expires:	Auq.	17, 1994				