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

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

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

Wichita, Kansas 67202					LEASE N	LEASE NAME Moore			
· •	CE: Fill d return	TYPE OR PRINT :: Fill out completely return to Cons. Div.			WELL NUMBER 1-B Ft. from S Section Line				
offi			ice within 30 days.			Ft. from E Section Line			
EASE OPERATOR	Raymond Oil Cor				SEC1	2_TWP265RG	E. <u>14W</u> (E)or(W)		
DDRESS	P.O. Box 48788 Wichita, KS 67201					COUNTYPratt			
HONE#(316) 838	3-8574 OPERATORS	LICENSE N	0. <u>50</u>	46	Date We	il Complete	d		
haracter of Wel	0il	•		ر الاسود د.	Pluggin	g Commenced	11/29/88		
011, Gãs, D&A, 5	SWD, Input, Water So	pply Wei. et	ATE COR	RECEIVED ROPE	WWIZETON	g Completed	12/20/88		
he plugging pro	posal was approved o	on	HIE		<u> </u>		(date)		
у			U	EC 28 1	ეგე (Ko	CC District	Agent's Name).		
s ACO-1 filed?_	If not,	is well	log a	TISER/AFIDIA!	DIVISION				
roducina Formati	lon	Depth	to T	Wichita, Ka	nsas Bott	om T	D. 4377		
	nickness of all wate					-			
DIL, GAS OR WATE	R RECORDS				CASING RECO	RD			
Formation.	Content	From	То	Size	Put în	Pulled out			
		_		8 5/8		none			
	<i>_</i>	-	·}	5 1/2	4375	2553			
·		-			-[·			
	1 the manner in whi								
	method or methods us e the character o								
Plugged bo	ttom with sand t	0 4230	, du	mped 5a	acks ceme	nt, shot			
2443', plu	gged surface wit	:h 300#	hu11	s = 10 a	ലി. 50 sa	cks compan	t. 10 gel		
TOO# DULLS	8 5/8" plug 125	sacks	60/4	U poz 6	% gel.	<u> </u>			

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

Name, of	Plugging	Contractor	Kelso Casing	Pulling,	Inc.	_License No.	6050	

Address P.O. Box 347

NAME OF PARTY RESPONSIBLE FOR PLUGGING FEES: Raymond Oil Company

STATE OF___ Kansas ____ COUNTY OF _ Rice

Mike Kelso (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 filled that the same are true and correct, so help me God. (Signature) Mahu

(Address) P.O. Box 347 Chase, KS 67524

27th day of December <u>, 19⁸⁸ , 19</u> SUBSCRIBED AND SWORN TO before me this

Notary Public

My Commission Expires:

