STATE OF KANSAS STATE CORPORATION COMMISSION 200 Colorado Derby Building Wichita, Kansas 67202		WELL PLUGGING RECORD K.A.R82-3-117			API NUMBER 15-033-20272-0000 LEASE NAME McMoran	
		TYPE OR PRINT			WELL NO	JMBER 2
NOTICE: Fill out <u>complet</u> and return to Cons. D office within 30 days				ons. Div.	C NE NE	Ft. from S Section Line
•	•	*==.		·		Ft. from E Section Line
LEASE OPERATOR DoMar Oil & Gas ,Inc.					sec. 17	TWP.35 RGE.16W (E)or(W)
ADDRESS P.O.Box 238 Liberal, Ks. 67905-0238					COUNTY	Comanche
PHONE () 624-4744 OPERATORS LICENSE NO. 09723					Date He	Completed 11-20-76
Character of Well Gas .				Plugglr	ng Commenced 6-22-94	
(Oll, Gas, D&A, SWD, Input, Water Supply Well)					Pluggir	ig Completed $6-24-94$
Did you notify the KCC/KDHE Joint District Office prior to plugging this well? Yes						
Which KCC/KDHE Joint Office did you notify? Dodge City Lacy						
Is ACO-1 filed?	lf not,	ls well	log a	ttachod?_		
Producing Formation Depth to Top						
Show depth and thi	ckness of all wate	r, oll a	nd ga	s formati	ons.	
OIL, GAS OR WATER	RECORDS			. c	ASING RECO	RD
Formation	Content	From	To	Size	Put In	Pulled out
	· 	.[<u> </u>			
		·		8 5/8 4 1/2	<u>494</u> 5374	3430
				_4 1/2		3430
0]		
placed and the met	hod or methods use	d in inte	oduc • Oduc	as plugge Ina 1+ In	d, indicat to the hol	ing where the mud fluid wa e. If cement or other plug
were used, state t	he character of sa	me and de	epth	placed, f	rom feet	tofeet each set.
Pump 25 sks. of	cement & 2 sks.	or nul	1s t	O 4900'		· · · · · · · · · · · · · · · · · · ·
Pump 50 sks. of					_	
	cement from 520			& can 8	5/8 4 b	elow ground level
(It add	itional descriptio	n is nece	ssår	y, uso BA	CK of this	form.)
	•					
Name of Plugging C			_			License No. 6547
Addross	P.OBox 506 Libe	eral, Ka	naas	67905-0	506	
STATE OF	Kansas co	UNTY OF _	C	omanche		_,ss.
Gary D. Hanco						
above-described we	ck (President)		•	(Em	ployee of	Operator) or (Operator) of
	ll, being first du	ly sworn	on 02	ath, says	: That I h	Operator) or (Operator) of ave knowledge of the facts
statements, and ma the same are true	ll, being first du tters herein conta	bna beni	the	ath, says	: That I h	Operator) or (Operator) of ave knowledge of the facts scribed well as filed that

My Commission Ext

]

MOTARY PUBLIC, State of Kansas

MARY HOLTERMAN

My Appt. Exp

SUBSCRIBED AND SHORN TO before me this 25

(Addross)

Hotery Public