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STATE OF KANSAS NED MANGSTON STATE CORPORACION BUILDING WILLIAMS	TYPE OR PRINT NOTICE: Fill out completely and return to Cons. Div. office within 30 days.			BER 15-151-		
100 3 1999			. WELL NUI	WELL NUMBER A#1 Ft. from S Section Line '		
LEASE OPERATOR A & A Disco	very, Inc.		SEC. 16	SEC. 1 THP. MRGE. 1 (E) OF (H)		
ADDRESS P. O.Box 156, Hill City, Kansas 67642						
PHONE#(913 674-2768 OPERATORS LICENSE NO. 4748				Date Well Completed		
Character of Well <u>oil</u>			Plugging	Plugging Commenced 4-6-89		
(Oll, Gas, D&A, SWD, Input, Wat	er Supply Well)	Plugging	r g Completed <u>1</u>	2:30PM	
The plugging proposal was appro	•					
by <u>Steve Pfeifer</u>						
Is ACO-1 filled? Yesif						
Producing Formation Show depth and thickness of all OIL, GAS OR WATER RECORDS	}	d gas formatt				
Formation Content	From	1 · · · · · · · · · · · · · · · · · · ·		Pulled out		
		1033/4 4½ 4—	/ /	2338.1'		
	ds used in inter of same and 3650 & bai	roducing it i d depth plac .1 4 sks cen ement, 10 ge	nto the holed, from_ nent.	e. If cement of fe	or other plug eet each set	
(if additional descr	iption is nece	ssary, use BA	CK of this	form.)	* 4 %-1	
Name of Plugging Contractor G	reat Bend Ca	sing Puller	s, Inc. L	lcense No.	4635 CP	
Address <u>Box 768, Great</u>	BEnd. Kansas	67530		 -		
NAME OF PARTY RESPONSIBLE FOR PI	•		overy, Inc	c.		
STATE OF Kansas	COUNTY OF			,ss.		
Gary G. Burke			Employee of	Operator) or	(Operator) 'c	
above-described well, being first statements, and matters hereine the same are true and correct, s	n contained an	on oath, says: d the log of	: That I ha the above-d	ve knowledge d	of the facts	
		(Address)		ox 768, Grea	at BEnd, Ks	

SUBSCRIBED AND SWORN TO before me this __12th day of__

MOTARY PUBLIC - State of Kansas 1 LOVELLA? "MUTCEN" My Appt Exp. _/-/3-90 Notary Public

Form CP-4 Revised 05-88

1989