STATE OF KANSAS S' 20

## WELL PLUGGING RECORD

TATE CORPORATION	K.A.R82-3-117			API NUMBER: 15-151-21,619 -CCC			
00 Colorado Derb Ichita, Kansas	67202				LEASE N	LEASE NAME Shriver	
	TYPE OR PRINT				WELL NUMBER #1  Ft. from S Section Line		
	and retu	NOTICE: Fill out completely and return to Cons. Div.					
	office within 30 days-				Et.ser/& Section Line		
EASE OPERATOR W.K. Black, Inc.						SEC. 36 TWP.26s RGE. 12W(E)or(W)	
DDRESS 1540 N. Broadway Suite 202 Wichita, Kansas 67214					COUNTY	COUNTY Pratt	
HONE # (316) 263-8588 OPERATORS LICENSE NO. 3181						Date Well Completed	
haracter of Well <u>Oil</u>					Pluggin	Plugging Commenced 11-9-87	
Oll, Gas, D&A, SWD, Input, Water Supply Well)					Pluggin	Plugging Completed 11-16-87	
ld you notlfy th	e KCC Distri	ct Office pri	or to p	olugging †	his well?_	Yes	
hich KCC Office	did you noti	fy?Di	st#1	Dodge	City Kan	sas	
s ACO-1 filed?							
						omT.D4509'	
how depth and th						4,07	
OIL, GAS OR WATE		1			ASING RECO	RD	
					4		
Formation	Content	From	γo	Size	Put In	Pulled out	
·	_{			8-5/8"		none	
	<u> </u>		<u></u>	4-1/2"	4 <u>506!</u>	3060.1	
escribe in detail	t the manner	In which the	 NATT	HAS DINGGO	d ladicat	ing where the mud fluid was	
laced and the m	nethod or meti	hods used in	Introdu	icing it i	nto the ho	le. If cement or other plus	
ere used, state	e the charac	ter of same	and d	epth plac	ed, from	feet tofeet each set.	
3060', pu	lled a total	of 73 joints	<u>40 sac</u> s of 4-	ks cement 1/2" casir	to 35/5'.	Shot pipe @3531', ed surface with 3 hulls.	
<u> 10 gel. 5</u>	<u>0 cement, 10</u>	gel, l hull	relea	sed plug a	and 100 cer	nent, 60/40 pos, 6% gel.	
Plugging	Complete difional desc	cription is n	ecessar	y, use BA	CK of this	form.)	
ame of Plugging	Contractor_K	elso_Casing_)	Pulling	 . Inc.	- <del></del>	License No. 6050	
	.0. Box 347	Chase, I				——————————————————————————————————————	
TATE OF Kansa	s'.	COUNTY	F R	ice		,55.	
	o, Vice-Pres			(Em	ployee of	— Operator) or (Operator) of	
bove-described	well, being	first duly sw	orn on	oath, say	s: That I	have knowledge of the facts,	
he same are true	and correct	, so help me	God.	log of th	e above-de	scribed well as filed that	
			(	Signature		he Ilelan-	
			(	(Address)	Box Chas	34/ se, Kansas 67524	
·	SUBSCRIBED AI	nd SWORN TO b	efore n	ne this 2		•	
					The man	November 1	
• •	Mu Co11-	- Funles	_			ary Publ-Ic-IV. U	
•	My Commission	n Expires:	FA. E	IRENE ME State of K	7 🕶 + 5-33 🕍	STATE CORPORATION COMMISSION	
				My Appt. Exp. Ac		NOV 2 5 1087 Form CP-4	

CONSERVATION DIVISION