

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

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

15-119-20540-0000

API NUMBER \_\_\_\_\_

LEASE NAME Holms

WELL NUMBER 24 - 10

\_\_\_\_\_ Ft. from S Section Line

SW SE SW Ft. from E Section Line

SEC. 10 TWP. 33S RGE. 30W (E) or (W)

COUNTY Meade

Date Well Completed 1980

Plugging Commenced 1-10-85

Plugging Completed 1-14-85

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

LEASE OPERATOR National Oil Co.

ADDRESS Box 272 Russell, Kansas 67665

PHONE# (913) 483-6278 OPERATORS LICENSE NO. 5701

Character of Well Gas

(Oil, Gas, D&A, SWD, Input, Water Supply Well)

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 Paul Luthi

Is ACO-1 filed? \_\_\_\_\_ If not, is well log attached? \_\_\_\_\_

Producing Formation Marrow Depth to Top 5671 Bottom 5676 T.D. 6000

Show depth and thickness of all water, oil and gas formations.

OIL, GAS OR WATER RECORDS | CASING RECORD

Formation	Content	From	To	Size	Put in	Pulled out
Marrow	Gas	5666	5678	8 5/8	1549	none
				4 1/2	5735	2714

Describe in detail the manner in which the well was plugged, indicating where the mud fluid was placed and the method or methods used in introducing it into the hole. If cement or other plugs were used, state the character of same and depth placed, from \_\_\_ feet to \_\_\_ feet each set.

Pump 20 sks. of cement to 5000  
Pump 30 sks. of cement to 1500  
Pump 20 sks. of cement to 650  
Put 10 sks. of cement to 40 to 0 Cut off & cap 8 5/8 Weld on ID plate  
(If additional description is necessary, use BACK of this form.)

Name of Plugging Contractor Sargents Casing Pulling Service License No. 6547

Address Box 506 Liberal, Kansas 67901

STATE OF \_\_\_\_\_ COUNTY OF \_\_\_\_\_, ss.

(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 filed that the same are true and correct.

(Signature) Carolyn Gnad  
(Address) P.O. Box 272 Russell Ks.

FEB 26 1985

SUBSCRIBED AND SWORN TO before me this 25 day of February, 19 85  
Wichita, Kansas.

Carolyn Gnad  
Notary Public

My Commission Expires: October 7, 1987

