STATE OF KANSAS
STATE CORPORATION COMMISSION
200 Colorado Derby Building

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

15-007-21279-0000

API NUMBER 10/21/81

Wichita, Kansas 67202						LEASE NAME Oldham		
		TYPE (VELL NUMBER 1-U2		
NOTICE: Fill out <u>completely</u> and return to Cons. Div. office within 30 days.					<u>ly</u> •	SPOT LOCATIONC-NW-NW		
					5	SEC. 1 TWP.34SRGE.13 (SEN)or(W)		
LEASE OPERATORP.T.I.						COUNTY Barber		
ADDRESS 3535 Broadway, Suite C, Kansas City, MO 64111						Date Well Completed 10/27/81		
PHONE # (816) 753-1000 OPERATORS LICENSE NO. 8653						Plugging Commenced 7/6/86		
Character of Well <u>Gas</u> (Oil, Gas, D&A, SWD, Input, Water Supply Well)						Plugging Completed 7/17/86		
Did you notify the	KCC/KDHE Joint Di	istrict (offic	e prior to	o pluggir	ng this well? ves		
•	nt Office did you							
	If not,				-			
						ottom	50	
Show depth and thi	ckness of all wate	er, oil a	and g	as format	ions.	Perf. 4000-	-4004	
OIL, GAS OR WATER					CASING	RECORD	•	
		From	To	\$170	Du+ In	Pulled out		
Formation i	Content		То	Size	Put in			
		<u>-</u>		8 5/8 5 1 1/2	524 5249	none - 200sx		
		'		1 1/4	3249			
the mudifluid was the hole. If cemer depth placed, from	the manner in white placed and the met or other plugs was feet to feet of 150sx cement Hall	thod or m vere used aach set.	netho Ista Sa	ds used in te, the cl and from 4	n introdu naracter .400 to 3	ucing It into of same and 950 - 5sx cement wit	ch dump	
						-DEPENZEN-		
Jack <u>Luthie</u> and E	. <u>Morgenstern on l</u> Litional description	ocation on is nec	essa	rv. use B/	CK STATEG	RECEIVED OPPORATION COMMISSION		
Name of Plugging (Contractor <u>Clarke</u> C	orp.				HIL Deense No. 5105		
Address <u>P.O. BOX</u>	<u>187, Medicine Lodg</u>	e, KŞ 67	104		CON	SERVATION DIVISION		
				 		Wichita, Kansas		
STATE OF Kansas	C(DUNTY OF	Ba	arber		,55.		
I have knowledge o	ve-described well, of the facts, state ove-described well ne God.	ements, a	and ma	duly sworm atters her	on oath rein cont are tru	tained and	2	
State of Kansas - Notary Public				(Addre	(Address) <u>Medicine Lodge, KS 67104</u>			
GLENDA MORRISON	SUBSCRIBE	ED AND SW	ORN	TO before	me this	18 day of July	. 1986	
My Appt. Exp. 5/9/	90 <u>.</u>			Se	En De	18 day of July		
My Commission exp	res: <u>5/9/90</u>	<u> </u>				мотату мирііс		