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

OIL, GAS OR WATER RECORDS

STATE OF Kansas

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

API NUMBER 15-151-21,335-00-00

LEASE NAME_	Schoonover

WELL NUMBER #1

CASING RECORD

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

2310	Ft.	from	Ε	Section	Line

330 Ft. from S Section Line

LEASE OPERATOR TXO Production Corp.	SEC. 24 TWP. 275 RGE. 15 (X) or (W)
ADDRESS 155 N. Market, Suite 1000, Wichita, Ks. 67202	COUNTY Pratt
PHONE#(316)_269-7600OPERATORS LICENSE NO. <u>5171</u>	Date Well Completed 11-10-83
Character of Well <u>Oil</u>	Plugging Commenced 8-29-86
(Oil, Gas, D&A, SWD, Input, Water Supply Well)	Plugging Completed 8-29-86
Old you notify the KCC/KDHE Joint District Office prior to p	lugging this well? YES
which KCC/KDHE Joint Office did you notify? <u>unknown</u>	
is ACO-1 filed? YES If not, is well log attached?	
Producing Formation Mississippi Depth to Top 4476'	Bottom 4482' T.D. 4593'

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

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Formation	Content	From	To	Size	Put in	Pulled out
	Surface Csg.			8-5/8"	II jts.	
	Surface Csg. Completion Csg.			4-1/2"	112 jts.	69 jts.

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.

Plugged well w/ 4 sxs hulls & 100 sxs Econolite cement. Plugging completed @ 9:00 a.m.
on 8-29-86.

	(If additional description is necessary, use BACK of thi	s form.)	
Name of	Plugging Contractor <u>Clarke Oilfield Services</u>	License No	5105
Address_	107 W. Fowler, Medicine Lodge, KS. 67104		

(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

county of Sedgwick

the same are true and correct, so help me God.

(Signature)_

(Address)

Seffrey S/ Childs 158 W/ Market, Suite 1000, Wichita,

SUBSCRIBED AND SWORN TO before me this 🚄

day of September, 19

Notary Public

My Commission Expires

Connie F. Koenler
NOTARY PUBLIC
State of Kansas / 19
14 APPT. EXPIRES 7/10/19

09-04-86

Form CP-4 Revised 08-84