Form CP-4

STATE OF KANSAS STATE CORPORATION COMMISSION

Giral formation Completely

Mail or Deliver Report to:
Conservation Division
State Corporation Commission
211 No. Broadway
Wichita. Kansas

WELL PLUGGING RECORD

Wichita, Kansas	Mort	on	Count	ty. Sec	rwp <u>לטט</u> Rge.	<u>41V</u> (E)(
, NORTH	Location as "NE	T1 _	or footage from	om lines SE I	ΛM		
	Lease Owner Lease Name	Murr	hv		 -	Well No1	
	Office Address_	13	rawer 11/	//,Liberal,	Kansas	. WEII NO	
	Character of W	ell (completed a	as Oil, Gas o	r Dry Hole)			
ا د	Date well comp	leted	<u>-</u> -			28 19 (
	Application for plugging filed Application for plugging approved				12- 12-		
					1 <u>2</u> -		
	Plugging comme Plugging comple		<u> </u>		-1-	$\frac{1}{3}$ $\frac{19}{19}$	
 _	Reason for aban		l or producin	g formation	Dry h		
1 ! ! !	If a producing v	well is abandon	ed, date of la	ast production_		19	
Locate well correctly on above		obtained from	the Conserv		or its agents befo	re plugging was o	
Locate well correctly on above Section Plat	menced?			 			
Name of Conservation Agent who stroducing formation Upr.Mor	ros Sand(Purdy) D	enth to ton 4	990 Botton	5014	Total Depth of	Well 5398	
show depth and thickness of all wa			Dottor	11	Total Depth of	** CH	
_							
OIL, GAS OR WATER RECO	IKDS					CASING RECORI	
FORMATION	CONTENT	FROM	то	SIZE	PUT IN	PULLED DUT	
				85/8	1496	none	
	_		 	4 1/2	5060	3011	
			 		 		
		<u> </u>	1				
·		ł	<u> </u>	<u> </u>			
3' below ground	d level & weld met	tal cap on s	ame.	· · · · · · · · · · · · · · · · · · ·			
					REC		
		VTATE CORPORATION COMMISSION					
			JAN 16 19c 1				
		1-16-64					
	·- <u>-</u>					ION DIVIL " "	
					ANICUUS	. Kansar	
Name of Plugging Contractor	(If additional Sargent	description is nece s Casing Pu	ssary, use BACI	K of this sheet) /ice Licen	se No.511		
Address	121 W .	<u>9th, Liberal</u>	<u>, Kansas</u>				
							
STATE OF KAN	ISAS, cou	NTY OF	SEWARE)	_, SS.		
	Luck		employee of	owner) or (own	•	of the above-descr	
vell, being first duly sworn on oat above-described well as filed and t		owledge of the	facts, statem	ents, and matte	ers herein contain	ed and the log o	
The state of the s		(Signature)	De	hin to	(uch		
		, <i></i>	Box 1177	,Liberal, Ka	ınsas		
STREETHER AND SWORN TO b	efore me this 15th	day of_			(Address)	, 64	
SUBSCRIBED AND SWORN TO D	OLVIV MG UMS	uay or_			, 19	<u> </u>	
					" 17	, ·	
de accompanion compani			•••	Mariland	ene Lea	Mary D. 11	
viy commission expires	-5-66			Marlene Ke	eating	Notary Publ	
y commission expires 1	-5-66		····	Marlene Ke	eating	Notary Publ	