STATE OF KANSAS

STATE CORPORATION COMMISSION
200 Colorado Derby Bldg
Wichita, Kansas 67202

WELL PLUGGING RECORD

Give All Information Com Make Required Affidavit	• .			4		- 0/		
.	COUNTY Location a	Clark s in quar	ters or	SEC. 1 footage f	from line	P. <u>34</u> ≘s:	_RGE22_XE/V	
	C/NE/NE							
	Lease Owner	r Mus	tang D	rilling &	Explo:	ration	ı	
	Lease Name						\bullet . #1 (OWWO)	
	Office Add	ress B	ox 160	9 - Great	Bend,	Kansa	as 67530	
	Character	of Well (Complet	ed as Oil,	Gas or	Dry Ho	ole):	
	_i Date Well	Completed	<u> </u>					
	Application	Application for plugging filed						
	Plugging c	Plugging commenced July 13, 1983						
	Plugging co	ompleted_		July 1	.9, 19 <u>8</u>	3		
	- Reason for	abandonm	ent of	well or pr	oducing	format	ion	
Locate Well	Depleted							
correctly on above Section Platt.	Was permis	Was permission obtained from the Conservation Division or it's						
,	Agent's be	fore plug	ging wa	s commence	d? <u>Ye</u>	s		
Name of Conservation Age	nt who superv	ised plug	ging of	this well	Вор	Tarbu	tton	
Producing formation		Depth to	top	bott	on_	T.T). <u>5545</u> '	
Show depth and thickness	of all water	, oil and	gas fo	rmations.			•	
OIL, GAS OR WATER RECORD	, S						Casing Record	
Formation	Content	From	To	Size	Put in		Pulled Out	
FORMACION	CONTECTIO	11011		8 5/8"	612'		NONE	
	·	_		5 1/2"	4440'		3464.59'	
Dumped sand to 4200	method or me, state the cloch plug set.	thods use haracter (5) sack	d in in of same	and depth	placed,	from g @ 3	feet	
Squeezed well with	three (3) sa	icks hul	ls, tw	enty (20) sacks	gel,		
one hundred (100) sa released plug and pu	acks cement.	, ten (1	u) sac	ks ger,	one (1)	Sack	nulls,	
cement with 2% added	d gel and 2	% calciu	m chlo	ride. M	aximum	press	ure was	
750 psi and shut in	at 500 psi		<u> </u>					
						TATE COR	RECEIVED PORATION COMMISSION	
(If additiona	l description	is neces	sary, u	se BACK of	this si	neet)		
Name of Plugging Contrac		ckhold E	nginee	ring, In	<u>c.</u>	<u>/\U(</u>	9 0 2 1983 2-83	
			· · · · · · · · · · · · · · · · · · ·			19to	Commence of the state of the st	
STATE OF KANSAS James W. Rockhold	COUNTY OF _	(employ	ee of o	wner) or (owner or	opera	ator) of the	
above-described well, be facts, statements, and m filed and that the same	atters herein	containe	d and t	he log of	at I have the above }	ve knov ve-desc	vledge of the cribed well as	
		JAMES	(Sign	ature) CKHOL <u>D</u>	Box 698	W. 1 3 - Gr Address	eat Bend, Ks 67530	
SUBSCRIBED AND SW			· ////	day of	7/		19.83	
My Commission expires:	MUTARY PIELE 1 MARGARI My Appt. Exp	State of Kasses T PROSSER	# (Macue		Nota Nota	ary Public.	
				1				