•						
STATE OF KANSAS STATE CORPORATION COMMISSION 200 Colorado Derby Building Wichita, Kansas 67202		GING RECORD -82-3-117	API NUM	BER	3/20/54 SUSK	
	$\chi \nu$		LEASE N	AME	کاید	
	TYPE OR PRINT NOTICE: Fill out completely and return to Cons. Div.		WELL NU	WELL NUMBER		
			V. 4620	Ft. from	S Section Line	
· · · · · · · · · · · · · · · · · · ·	office wit	hin 30 days.	330	Ft. from	E Section Line	
LEASE OPERATOR MIDIO ENGREY				SEC. 3 TWP. 35 RGE. (E) or (W)		
ADDRESS POBOX 781025 WICHITH, KS				COUNTY SUMNER		
PHONE#(316) 681-0295 OPERATORS LICENSE NO. 3710				Date Well Completed $8/20/54$		
Character of Well OL				Plugging Commenced $8/27/88$		
(Oil, Gas, D&A, SWD, Input, Water Supply Well)				Plugging Completed $4/27/89$		
The plugging proposal was appr	oved on	8/10/8	<u>'8</u>		(date)	
by GLEN WARD			(KC	C District	Agent's Name).	
Is ACO-1 filed? VA If	not, is well	log attached	? 725			
Producing Formation LATION	Depth	to Top3	140 Bott	от <u>3145</u> т	.o <u>. 4198</u> '	
Producing Formation LATION Show depth and thickness of al	l water, oil a	nd gas forma	tions.	Pu	16 BACK@ 317	
OIL, GAS OR WATER RECORDS			CASING RECO	RD		
Formation Content	From	To Size	Put In	Pulled out		
	0	490 870	490		,	
		4190 51/2	4190	800		
Describe in detail the manner	in which the w	ll ell was plug	 ged, indicat	lng where t	he mud fluid was	
placed and the method or meth were used, state the charac	ods used in in: ter of same a:	troducing it nd depth pi	into the ho aced, from	le. If ceme feet to	nt or other plug: feet each set	
were used, state the character SANDGO BACK TO SQUEEZED 8 4/8				5 NO.	o por mix	
Unitar -	- 1 SACK	o sunt	ncz -			
(If additional desc	ription is nec	essary, use	BACK of this	form.)		
Name of Plugging Contractor	JONATHAN	- DIL C	Co	License No.	4231	
Address QUOQUIA	804 N.	HAVER 1.	1166 -	EL DORA	DO, KS	
NAME OF PARTY RESPONSIBLE FOR	PLUGGING FEES:	ZICH	par lles	1816	·	
STATE OF LANSAS	COUNTY OF	S604.	wick	_,ss.		
L.D. HALE					or (Operator) o	
above-described well, being fi statements, and matters here	to acceptate and ac-	ح مما مناجه اد	ys: That I h	ave knowled	ge of the facts,	
the same are true and correct,	so help me Go	d. (Stanatu	re)	dale		
TONTATIONED		(Address	Wichit	4-KS		
the same are true and correct, ATE TO THE TON COMMIS SUBSER ISED AN	SOASWORN TO hef	ore me this	and day	of May	,1989	
OFHILL		ک_	00.	A 7/2	7.00%	
LUCILLE BINONFELDT ROTARY PURES Sommission STATE OF WANSAS OF MISSION	Expires: Luc	ille B. VonF av 19. 1991	eldt Not	ary Public	11 min	
My Appt Exp - 19-41	-775.1.003 - 10	<u> </u>			Form CP-4	

Form CP-4 Revised 05-88