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

LEASE OPERATOR Mobil Oil Corporation

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

API	NUMBER	15-189-20	14/-
		/	

TYPE OR PR	THI
NOTICE: FILL out	completely
and return to	
office within	30 days.

beral Ks 67905-2173

LEASE	NAME_	Hauranth	<u> </u>
MELL	NUMBER	#3	

4030 Ft. from S Section Line

4022 Ft. from E Section Line SEC. 35 TWP. 34 RGE. 36 (E) or (W)

COUNTY Steven

Date Well Completed 10-31-84 Plugging Commenced 3-22-99

Plugging Completed 3-23-99

The plugging proposal was approved on 1-22-99(date) by Steve Pfeifer (KCC District Agent's Name).

is ACO-1 filed? \_\_\_\_\_\_\_if not, is well log attached? \tag{2}

PHONE 8 (3/6) 626-1142 OPERATORS LICENSE NO. 5208

(Oll, Gas, D&A, SWD, Input, Water Supply Well)

\_\_\_\_ Depth to Top\_\_\_\_\_ Bottom\_\_\_\_\_T.D. 3200 Producing Formation

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

OIL,	GAS	OR	WATER	RECORDS

Character of Well

## CASING RECORD

Formation	Content	From	To	Size	Put In 1730	Pulled out
		{	<del></del>	828	1730	<del></del>
	<del></del>		 	5/2	3185	1923
}		<b></b>		<del></del>	- <del></del>	

Describe in detail the manner in which the well was plugged, indicating where the mud fluid wa placed and the method or methods used in introducing it into the hole. If cement or other plug were used, state the character of same and depth placed, from feet to feet each set 3 hulls to 25 3x cmt. to plug perfs. from 3037 to 2837. Recovered 1923 5% 50 5x from 1760 to 1610 40 5x from 600 to 500 10 5x from 40 to 0

Cut off to capped 898 4 ft. below GiL.

(If additional description is necessary, use BACK of this form.)

Name of Plugging Contractor Sargent And Horton Plugging Inc. License No. 31151

Address Kt 1 Box 49 BA Tyrone OK 73951 9731

NAME OF PARTY RESPONSIBLE FOR PLUGGING FEES: Molel all Carporation

Kansas COUNTY OF Seward STATE OF

(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 filled that

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

PART HIS  (Signature)

I Karon a. Cas (Address) 40. Box 217.7 Liberal KS 1, 7905

WATER 2 00-01
WATER 2 00-01
SUBSCRIBED AND SWORN TO before me 191s

day of april

14PR - 7 1998

STATE

Notary Public )CHOIM My Commission Expires: