, 15-119-10219-0000

TO:
Jewel M. Ogden, Director
500 Insurance Building
212 North Market
Wichita 2, Kansas

File No. _____ County: _Meade_ 10-3-59

Location: _C NE - SE_ Sec. _18_ Twp. _32_ Rge. _30_ (E) ___ (W) X

Name of Field: _W - C_ Total Depth: _5710_

I have this date completed supervision of plugging of:

Lease Name: _Longhofer_ Well No. _1_

Operator's Full Name: _Thomas-Brewer Oil-Gas_

Complete Address: _PO Box 985 Liberal Kansas_

Plugging Contractor: _Bennett-Roberts Dlg Co_

Address: _Russell Kansas._ License No. _DR_

Oil Well _____ Gas Well _____ Input Well _____ SWD Well _____ D & A X

Other well as hereafter indicated: _____

Was any delay in plugging operations caused by Conservation Division Agent? Yes ___ No X

If yes how long? _____ Reason: _____

Operation Completed: Hour _8 PM_ Day _29_ Month _9_ Year _1959_

The above well was plugged as follows:

8⅝" S.P. 1621' C.4.C. Poor hole filled with heavy mud to 600' Set Plug Displaced 20 sx cement through drill pipe. Mud to 35' Set Plug Cemented to base of cellar.

Signed: _W. C. Ricci_
Conservation Division Agent

Reviewed: _J. Munro Brock_
Field Supervisor

Remarks: