

LEASE NAME Cosner

WELL NUMBER 1-30

TYPE OR PRINT  
 NOTICE: Fill out completely  
 and return to Cons. Div.  
 office within 30 days.

2310 Ft. from S Section Line

660 Ft. from E Section Line

SEC. 30 TWP. 32S RGE. 31W (E) or (W)

COUNTY Seward

Date Well Completed \_\_\_\_\_

Plugging Commenced 3-18-91

Plugging Completed 3-19-91

LEASE OPERATOR Shepler & Thomas Inc.

ADDRESS Box 1162 Liberal, Kansas 67905-1162

PHONE# (316) 624-0750 OPERATORS LICENSE NO. 3711

Character of Well D & A

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

Did you notify the KCC/KDHE Joint District Office prior to plugging this well? Yes

Which KCC/KDHE Joint Office did you notify? Glenn Barlow

Is ACO-1 filed? Yes If not, is well log attached? \_\_\_\_\_

Producing Formation N/A Depth to Top N/A Bottom N/A T.D. 6005

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

OIL, GAS OR WATER RECORDS

CASING RECORD

RECEIVED  
 STATE CORPORATION COMMISSION

| Formation | Content | From | To | Size  | Put In | Pulled out |
|-----------|---------|------|----|-------|--------|------------|
| N/A       | N/A     |      |    | 8 5/8 | 1640   | 0          |
|           |         |      |    | 4 1/2 | 5205   | 3258       |
|           |         |      |    |       |        |            |
|           |         |      |    |       |        |            |

APR 25 1991

CONSERVATION DIVISION  
 Wichita, Kansas

Describe in detail the manner in which the well was plugged, indicating where the mud fluid was placed and the method or methods used in introducing it into the hole. If cement or other plugs were used, state the character of same and depth placed, from \_\_\_ feet to \_\_\_ feet each set.

Pump 50 sks. of cement from 1670 to 1570

Pump 30 sks. of cement from 700 to 600

Put 10 sks. of cement from 40 to 0 Cut off & cap 8 5/8 3' below ground level

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

Name of Plugging Contractor Sargent's Casing Pulling Service License No. 6547

Address P.O. Box 506 Liberal, Kansas 67905-0506

STATE OF Kansas COUNTY OF Seward, ss.

R. F. Burke

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

(Signature) R. F. Burke

(Address) P.O. Box 1162 Liberal, KS 67905

SUBSCRIBED AND SWORN TO before me this 24th day of April, 19 91



Maureen Geddes  
 Notary Public

My Commission Expires: 11-02-92