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

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

Pi	NUMBE	R	15-175-20,773
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117	VL1 NAME) E L		
			-	
	LEASE NA	ME.	Norman	Rehr

TYPE OR PRINT NOTICE: Fill out completely and return to Cons. Dly.

WELL NUMBER KM 1-16

SPOT LOCATION C-NE - SW

SEC. 16 TWP. 32 RGE 31 (的or(W)

COUNTY Seward

Date Well Completed 11-11-84

Plugging Commenced 11-12-84

Plugging Completed 11-12-84

office within 30 days. Northern Pump Company LEASE OPERATOR

PHONE #8316) 276-3267 OPERATORS LICENSE NO. 5253

ADDRESS Box 937, Garden City, Kansas 67846

Character of Well Oil-Gas (OII, 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? Dodge City, Ks. Steve Durrant

Is ACO-1 kkkwkkAttached If not, is well log attached?

Producing formation None _____ Depth to top_____ bottom_____ T.D. 6020

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

OIL,	GAS	OR	WATER	RECORDS

CASING RECORD

Formation	Content	From	To	Size	Put in	Pulled out
				8-5/8"	1633	Cement Circulated

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. 50 Sk Plug at 1680'

40 Sk Plug at 600'

10 Sk Plug 0 to 40'

15 Sks in Rat Hole

10 Sks in Mouse Hole

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

Name of Plugging Contractor J. B. Bohannan Drilling, Inc. Address 2324 N. Hiway 83, Liberal, Kansas 67901 ___License No. 5879

STATE OF Kansas COUNTY OF Finney

J. Leo Fife (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 frue and correct, so help me God.

> (Signature) (Address) \

Box 937, Garden Citx/ Ks. 67846

STATE OF KANSAS SUBSCRIBED AND SWORN TO before me this 6th day of December , 19 84

Cyclical Iola L. Upchurch

My Commission expires:___

My Appt. Expires 11-12-89

IOLA L. UPCHURCH

NOTARY EURLIC

November 12, 1988

Form CP-4 Revised 01-84