STATE OF KANSAS STATE CORPORATION COMMISSION	WELL PLUGGING RECORD K.A.R82-3-117			API NUMBER 007-220, 26-660	
200 Colorado Derby Building Wichita, Kansas 67202					
	TYPE OR PR			L NUMBER 1	
	NOTICE: Fill out completely and return to Cons. Div. office within 30 days.			SPOT LOCATION NW SE NW	
			SEC	37 sec. <u>30</u> twp.31Srge.12 (XXXX(W	
CEASE OPERATOR Graves Drilling	<u>Co. (</u>			INTY Barber	
ADDRESS 910 Union Center, Wichita, KS 67202				Date Well Completed 4/27/85	
PHONE # (316) 265-7233 OPERATORS LICENSE NO. 5428				ugging Commenced 8/7/85	
Character of Well <u>oil</u> (OII, Gas, D&A, SWD, Input, Water	Supply Well)	•	Plu	ugging Completed 8/21/85	
Did you notify the KCC/KDHE Joint	District Offic	e prior to	o plugging	this well? <u>yes</u>	
Which KCC/KDHE Joint Office did y	ou notify?	Dodge Cit	У		
Is ACO-1 filed? yes If no	t, is well log	attached?			
Producing formation Mississippi	Depth to	top	bo†1	T.D. 4600	
Show depth and thickness of all w	ater, oll and g	as format	lons.		
OIL, GAS OR WATER RECORDS			CASING RE	CORD	
Formation Conten	† From To	Size	Put in	Pulled out	
		8 5/8	266	None	
		4 1/2	4598	3469	
Describe in detail the manner in	which the well	Was niuon	d Indicat	Ing where	
the mudifiuld was placed and the	method or metho	ds used 1	n introduci	ng it into	
the hole. If cement or other plug depth placed, from feet to fee					
bailor from 4475 to 4440, 2sx hulcement; 60-40 POZ, 6% jell	ls, 15sx jell,	50sx ceme	nt, 10sx je	ell, lsx hull, plug, 125s	
Sun pumping					
Shut in 600 - max 750 Jack Luthie and Elmo Morgenstern	on location	,			
(If additional descrip		rγ, use <u>B</u>	ACK of this	form.)	
Name of Plugging Contractor <u>Clar</u>	ke Corp.		·	License No. 5105	
Address P.O. Box 187, Medicine I	odge, KS 67104				
					
STATE OF Kansas	COUNTY OF B	arber		,SS.	
Elmo Morgenstern		(empl	oyee of ope	erator) or	
(operator) of above-described well have knowledge of the facts, st					
the log of the above-described we					
cerrect, so help me God.		(Sign	ature) <u>&</u>	AMoyeston	
CAREN J. McCULLOUGH NOTARY PUBLIC		(Addr	ess) <u>Medi</u>	cine Lodge, KS 67104	
STATE OF KANSAS SUBSER	IBED AND SWORN	TO before	me this 25	day of September, 1985	
ly Appt. Exp. 10-29-87	· ·		SECENTY	$\overline{\mathcal{M}}$	

My Commission expires: June 29, 1987

SEP 2 7 1985

Form CP-4 Revised 01-84