WELL PLUGGING RECORD TATE OF KANSAS API NUMBER 15-129-20654-0000 TATE CORPORATION COMMISSION 100'Colorado Derby Building K.A.R.-82-3-117 LEASE NAME Claridge ∢ichita, Kansas 67202 WELL NUMBER 1 TYPE OR PRINT NOTICE: Fill out completely and return to Cons. Div. C N/2 SE Ft. from S Section Line office within 30 days. \_\_\_\_ Ft. from E Section Line \_EASE OPERATOR Patton Oil Co. SEC. 4 TWP. 32S RGE. 41W (E) or (W) ADDRESS 5990 Greenwood Plaza Blvd.,#116, Englewood, Co. 80111 COUNTY Morton PHONE \$ (303) 773-601644 \_\_OPERATORS LICENSE NO. \_\_5992 Date Well Completed 1-19-83\_\_\_\_ Character of Well <u>Gas</u> Plugging Commenced 3-20-92 (Oll, Gas, D&A, SWD, Input, Water 'Supply Well) Plugging Completed 3-23-92 The plugging proposal was approved on 3-19-92 (data) by \_\_\_\_ Glen Barlow (KCC District Agent's Name). Is ACO-1 filed?\_\_\_\_\_\_If not, is well log attached?\_\_\_\_\_\_ Producing Formation Depth to Top Bottom T.D. 5290 Show depth and thickness of all water, oil and gas formations. CASING RECORD OIL, GAS OR WATER RECORDS To Size Put In Pulled out Formation Content From 8.5/8 735 Describe in detail the manner in which the well was plugged, indicating where the mud fluid w placed and the method or methods used in introducing it into the hole. If cement or other plu were used, state the character of same and depth placed, from feet to feet each se Pump 20 sks. of cement & 1 sk. of hulls to 5000 Pump 50 sks. of cement from 1600 to 1500 Pump 50 sks of cement from 750 to 650 Put 10 sks. of cement from 40 to 0 Cut off & cap 8 5/8 4' below ground level (if additional description is necessary, use <u>BACK</u> of this form.) Name of Plugging Contractor Sargents's Casing Pulling Service License No. 6547 Address P.O. Box 506, Liberal, Kansas 67905-0506 NAME OF PARTY RESPONSIBLE FOR PLUGGING FEES: \_\_\_\_ Patton 0il Co. STATE OF COUNTY OF (Employee of Operator) or (Operator) above-described well, being first duly sworn on oath, says: That I have knowledge of the fact statements, and matters herein contained and the log of the above described well as filled the the same are true and correct, so help me God. (Signature) (Address) SUBSCRIBED AND SWORN TO before me tris 77 th day of Notary/ Public

My Commission Expires:

Form CP
Revised 05-