STATE OF KANSAS' STATE CORPORATION COMMISSION	WELL PLUGGING RECORD K.A.R82-3-117		API NUMB	API NUMBER 007-20-447A-00-0 LEASE NAME Mott WELL NUMBER OWNO #1		
200 Colorado Derby Building Wichita, Kanses 67202	:	LEASE NA				
	TYPE OR PRINT NOTICE: Fill out completely and return to Cons. Dly, office within 30 days.		WELL NUM			
			1980	1980 Ft. from S Section Line		
			1980	Ft. from E	Section Line	
LEASE OPERATOR TXO Production Corp			sec.12	TWP 31S RGE	12 LENO (P)	
ADDRESS 1660 Lincoln St. Suite 1800 Denver co. 80264			COUNTY _	Barber		
PHONE # ( 303 861-4246 OPERATORS LICENSE NO. 5171			Date Wel	1 Completed	4-25-85	
Character of Well Gas			Plugging	Commenced	12-5-85	
(Oli, <u>Gas</u> , D&A, SWD, Input, Water Supply Well)			Plugging	Completed	12-19-89	
Did you notify the KCC Distric	t Office prior to pi	ugging t	his well?	yes	······································	
Which KCC Office did you notif	y? Dodge City			·		
Is ACO-1 filed? X If	not, is well log at	tached?_	X			
Producing Formation X	Depth to To	РХ	Botto	mT.	D• 4670	
Show depth and thickness of al	I water, oil and gas	formati	ο'π S •			
OIL, GAS OR WATER RECORDS CA				ING RECORD		
Formation   Content	From To	Size	Put In	Pulled oustA	RECEIVED TE CORPORATION COM	
		8 5/8		none		
		4 ½	4483	3200	DEC 2 0 1989	
			·/		CONSERVATION DIVIS	
Describe in detail the manner placed and the method or meth were used, state the charac	ods used in Introduc	ing it i	nto the hol	le. If cemen	t or other pl	

MISSION sand from 4442 to 4150 4sx cement with dump bailor BJ primped 4- Hull- 10 Jell- 50 cement - 10 Jell 1- Hull plug 100 cement 50-40 POZ 6% Jeil Pfitter and Elmo on location (if additional description is necessary, use BACK of this form.) 5105 Name of Plugging Contractor Clarke Corporation License No. 67104 Address PO Box 187 Medicine Lodge, Ks COUNTY OF Barber STATE OF Kansas Elmo R. Morgenstern (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. NOTARY PUBLIC - State of Kansas (Signature) 🧒 My Appl Exp. CAREN J. WINCHELL 67104 Medicine Lodge, Ks (Address) December SUBSCRIBED AND SWORN TO before me this 19th Notary My Commission Expires: June 21, 1991 Form CP-4