## KANSAS STATE CORFORATION COMMISSION

N RECEIVED COMMISSION

1959

**DIVISION** nsas

•					JA	K1312 101	KPORAHCM
TO:	WELL PLU	IGGING SUPI	ERVISOR	S REPORT			FEB27
Jewel M. Ogden, Director 500 Insurance Building 212 North Market Michita 2, Kansas						CON -	VATION
File No	Loc	ation: )	26. S	E. n.	<u>C</u>		
County: Summer	; 	Sec.	3/ 3	гwp. <u>Э</u>	2_Rge	. 2	(E)
Name of Field or Pool:					Total	Depth:	423
I have this date complete	ed superv	rision of p	olugging	of:		-	
Well No.	Lease	Che	Livo	rod			
Operator's Full Name	haw	ver -	-ar	moci	27	lrc.	
Complete Address: 8/						Vich	ita
	•			//			

Plugging Contractor: Address: License No. Gas Well \_\_\_\_Input Well\_\_ SWD Well D & A Abandoned Oil Well If well is a rotary drilled dry hole did operators wait for you to arrive\_ Reason: If yes how long Hour / 30 P. MIDay Operation Completed: The above well was plugged as follows: I hereby certify that the above well was plugged as herein stated and that  $\overline{\iota}$  was present while the above well was being plugged. Signed:

Well Plugging Supervisor

I hereby state that I was not present while the above well was being plugged, however, to the best of my knowledge and belief it was plugged as herein stated. A full account for my not being present is as follows:

Revi.ewed

Remarks

Signed:

Well Plugging Supervisor

PLUGGING SEC 31 T 30 R 2 N

BOOK PAGE 21 LINE 36