

37A E OF KANSAS
STATE CORPORATION COMMISSION
200 Colorado Derby Building
Wichita, Kansas 67202

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

API NUMBER 15-151-21839-00-4D

LEASE NAME Rosenbaum D

WELL NUMBER 1

2970 Ft. from S Section Line

1650 Ft. from E Section Line

SEC. 15 TWP. 28 RGE. 12 (E) or (W)

COUNTY Pratt

Date Well Completed 06-03-87

Plugging Commenced 11-07-94

Plugging Completed 11-09-94

TYPE OR PRINT
NOTICE: Fill out completely
and return to Cons. Div.
office within 30 days.

LEASE OPERATOR Siroky Oil Management, Inc.

ADDRESS P. O. Box 464, Pratt, Kansas 67124

PHONE# (316) 672-5713 OPERATORS LICENSE NO. 3959

Character of Well Oil

(Oil, Gas, O&A, SWD, Input, Water Supply Well)

The plugging proposal was approved on 10-31-94 (date)

by Steve Pfeifer (XCC District Agent's Name).

Is ACO-1 filed? Yes If not, is well log attached? N/A

Producing Formation Kind Depth to Top 43655 Bottom 43665 T.O. 4510

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
	Surface	0	276	8-5/8"	276	0
	Production	0	4491	5 1/2"	4491	2540

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 plug were used, state the character of same and depth placed, - from feet to feet each set

Pumped 50 sacks of cement, 300# hulls and 10 sacks gel. Second plug 10 sacks of gel, 100# hulls, released plug. Pumped 100 sacks of cement, shut in 50#, pressure max 200#

Name of Plugging Contractor D. S. & W. Well Servicing, Inc. License No. 6901

Address P. O. Box 231, Claflin, Kansas 67525

NAME OF PARTY RESPONSIBLE FOR PLUGGING FEES: Brian Siroky

STATE OF Kansas COUNTY OF Barton, ss.

Arthur P. Strube (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 the the same are true and correct, so help me God.

(Signature) Arthur P. Strube

(Address) P. O. Box 231, Claflin, Kansas 67525

SUBSCRIBED AND SWORN TO before me this 14 day of November 1994

Bonnie L. Council
Notary Public

RECEIVED
STATE CORPORATION COMMISSION
NOV 15 1994
11-15-94
Form LCP 510N
Revised 05-88

My Commission Expires: April 8, 1997
USE ONLY ONE SIDE OF EACH FORM

