This form shall be filed in daplicate with the Kansas Corporation Cormission, 200 Colorado Derby Building, Wichita, Kansas 67202, within ten days after the completion of

the well, regardless of how the well was completed. Attach separate letter of request if the information is to be held confidential . If confidential, only file one copy. Information on side one will be of public record and side two will then be held confidential. Circle one: Oil, Gas, Dry, SWD, OWWO, Injection. Type and complete ALL sections. Applications must be filed for dual completion, commingling, SWD and injection. Attach wireline logs (i.e. electrical log, sonic log, garaz ray neutron log, etc.).
KCC # (316) 263-3238. (Rules 82-2-105 & 82-2-125) OPERATOR SOUTHWEST GAS STORAGE COMPANY API NO. 15 119 20361 -00 00 ADDRESS P.O. Box 1348 COUNTY Meade FIELD Borchers North Kansas City, Missouri 64141 **CONTACT PERSON Mr. D. R. Carlile PROD. FORMATION Obs PHONE (316) 873-5469 LEASE Wiens PURCHASER Panhandle Eastern Pipe Line Company WELL NO. 2-11 ADDRESS P.O. Box 1348 WELL LOCATION 660' S & 660' W Kansas City, Missouri 64141 Ft. from _____Line and Patrick Well Service DRILLING Ft. from _____ Line of CONTRACTOR P.O. Box 1273 ADDRESS of the NE/csec_11 TWP_33S RGE.28W Liberal, Kansas 67901 WELL PLAT PLUGGING KCC -CONTRACTOR ADDRESS (Office Use) TOTAL DEPTH 5890 PBTD 5829 13 -SPUD DATE 7-28-79 DATE COMPLETED 3-16-82 ELEV: GR 2500 DF _ KB DRILLED WITH (CABLE) (ROTARY) (AIR) TOOLS 6-9-82 Amount of surface pipe set and cemented 1449 . DV Tool Used? RECEIVED STATE CORPORATION COMMISSIBLE AFFIDAVIT STATE OF KANSAS , COUNTY OF MEADE ____ss, 1, <u>JU</u>N - 9 1982 OF LAWFUL AGE, BEING FIRST DULY SWORN UPOXOMESSYCLUM, DIVISION D. R. CARLILE DEPOSES THAT HE IS FIELD SUPERINTENDENT (FOR)(OF) SOUTHWEST GAS STORAGE COMPANY OPERATOR OF THEBORCHERS NORTH GAS STORAGE FIELDERSE, AND IS DULY AUTHORIZED TO MAKE THIS AFFIDAVIT FOR AND ON THE BEHALF OF SAID OPERATOR, THAT WELL NO. 2-11 ON SAID LEASE HAS BEEN COMPLETED AS OF THE 16 DAY OF MARCH , 19<u>82</u>, AND THAT ALL INFORMATION ENTERED HEREIN WITH RESPECT TO SAID WELL IS TRUE AND CORRECT. FURTHER AFFIANT SAITH NOT. SUBSCRIBED AND SWORN BEFORE ME THIS 95 19 82 DAY OF & racogne NOTARY PUBLIC MY COMMISSION EXPIRES: _ **The person who can be reached by phone regarding any questions concerning this information. Within 45 days of completion, a witnessed initial test by the Commission is required if the well produces more than 25 POPD or is located in a Basic Order Pool.