· John State						15-	095-212/6 %	10-00	
STATE OF KANSAS	**************************************				API NUMBER	Rag	o Junction	Junction	
STATE CORPORATION COMMISSION  130 S. MARKET, ROOM 2078  TYPE OR PRINT					LEASE NAME	_ 1		<del></del>	
WICHITA, KS 67202	KELEIVEDNO	TYPE OR PRINT NOTICE: Fill out Completely and return to coms. div.			WELL NUMBER -				
•	coms. αιν 30 days.	•	ft. from S Section Line						
	AUG 2 1 2002		•		330	·	_ ft. from E Se	ection Line	
LEASE OPERATOR	KCC WICHITA Messenger Petroleum, I	Inc.			SEC. 9 T	WP. <u>30</u>	RGE. 7	. (E) or 🐠	
EDE C. Main Vinaman VC 67000					COUNTY King	gman			
					Date Well Com			<u> </u>	
PHONE # ( ) OPERATORS LICENSE NO.					Plugging Commenced 8/1/02 Plugging Completed 8/2/02				
Character of well Oil									
(Oil, Gas, D&A, SWD, inp	out, Water Supply Well)				i lugging comp	CICU			
The plugging proposal was a	approved on 8/1/02	2						(date)	
<sub>by</sub> Doug Louis							(XCC District Age	ent's Name).	
s ACO-1 filed?	yes if not, is well	log attached ?		not availabl	e to us				
- 10-	De	=			Bottom		T.D	1200	
Show depth and thickness of	of all water, oil and gas forma						1.D		
OIL, GAS OR WATER RE		1 <b></b>	1~		G RECORD	D-4-1-			
Formation	Content	From	То	Size	Put in	Pulled o	ut		
				8 5/8	265	none		·	
				4 1/2	4197	3220	,	<b>'.</b>	
		1		1.40 1.5	•		4.		
placed and the met were used, state th Sand at 4052, bailed 4 sks	he manner in which thod or methods use the character of same cent. Shot pipe at 3419, 33 to 310°, circulated cement to	ed in intro and deptl 220, worked fre	ducing h place ee. Pull to	it into thed, from _ 1250, well flo	e hole. If one of the second o	cement	t or other pl _feet each s	lugs set	
		· · · · · · · · · · · · · · · · · · ·	<u></u>				·		
<del> </del>					<u></u>		,		
	Quality Well Service	e Inc		۱, -		319	25		
401 M/s	est Msin, Lyons, KS 67	554		•	License N	lo. —			
Address 401 VVE								## <b>T</b>	
NAME OF PARTY RESPON	SIBLE FOR PLUGGING FEE	s: Iviesse	nger Pe	troleum, Ind	<u>C.</u>				
STATE OF		COUNTY OF				<del></del>	_ , SS.		
		·····		(E	mployee of	Operat	or) or (Opera	ator) of	
statements, and ma the same are true	ell, being first duly atters herein contain and correct, so help	ed and the	e log c	of the abo					
erania. Normalia in territoria	en de la companya de La companya de la co	o' Lest 1	(, ·	(Signature)	pon + 1.	WN9		<u>.</u>	
,	ı	· · · · · · · · · /	$\gamma 1a$	(Address)	1 - 1	· + 1 · + 1		<del></del>	
SUBSCR	RIBED AND SWORN TO be	fore me	ohn	day of	Nuguran	M. WOO RY PUBLIC OF KANSA	g , 20-(	92-	
My	commission Expires : $2$	19/2002	<u> </u>	<u></u>	Notally Applicat	l	— <del>—</del> .	Form CP-4 ised 05-88	