

STATE OF KANSAS
STATE CORPORATION COMMISSION
200 Colorado Derby Bldg.
Wichita, Kansas 67202

Form CP-4
Rev. 12-15-80

WELL PLUGGING RECORD

Give All Information Completely
Make Required Affidavit

COUNTY Kingman SEC. 8 TWP. 30S RGE. 7W E/W
Location as in quarters or footage from lines:
NW SW NW

Lease Owner McCoy Petroleum Co.
Lease Name Kohman Well No. 3
Office Address One Main Place, Suite 410, Wichita, Kansas 67202
Character of Well (Completed as Oil, Gas or Dry Hole): Gas
Date Well Completed 11-4-77
Application for plugging filed 6-16-82
Plugging commenced 6-18-82
Plugging completed 6-21-82
Reason for abandonment of well or producing formation Dry

Locate Well
correctly on above
Section Platt.

Was permission obtained from the Conservation Division or it's
Agent's before plugging was commenced? Yes

Name of Conservation Agent who supervised plugging of this well M. V. Leslie
Producing formation Krider Depth to top 1348 bottom 1380 T.D. 3809
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
				8 5/8	231	None
				4 1/2	1486	980

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 hold. If cement
or other plugs were used, state the character of same and depth placed, from _____ feet
to _____ feet for each plug set.

Sand from 1449 to 1330
4 sacks cement from 1330 to 1300
Ripped at 1100 and 1000
Pumped in 15 Jell
6 Hull
10 Jell

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150 sacks common cement 3% c.c.
(If additional description is necessary, use BACK of this sheet)
Name of Plugging Contractor _____

STATE OF Kansas COUNTY OF Barker, ss.
Edna K. Morgenstern (employee of owner) or (owner or operator) of the
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 and that the same are true and correct. So help me God.

(Signature) Edna K. Morgenstern
Medicine Hat, Wyo.
(Address)

SUBSCRIBED AND SWORN TO before me this 22nd day of June, 1982.

My Commission expires: April 4, 1984

Jessie Hamilton
Notary Public.



Natural Gas • Crude Oil
Exploration & Production

McCOY PETROLEUM COMPANY

John Roger McCoy
Partner-Geologist

816 Vickers-KSB&T Building Wichita, Kansas 67202
316-265-9697

DAILY REPORT

McCOY PETROLEUM COMPANY
#3 Kohman
NW SW NW Sec. 8-308-7W
Spivey-Grabs Field
Kingman County, Kansas

Contractor: Sweetman Drilling, Inc.
Geologist: Bob McCann

Elevations: 1505 KB 1502 DF 1495 GL

11-04-77 Move in Rotary Tools. Rig up. Spud @ 5:00 P.M. Set 8-5/8" surface casing @ 231' with 200 sacks common cement, 2% gel, 3% calcium chloride. P.D. @ 11:15 P.M.

11-05-77 W.O.C. @ 231'

11-06-77 Taking DST #1 @ 1390'

DST #1 1351-1390' (Krider)
Open 30", S.I. 30", Open 70", S.I. 30"
Good blow on 1st open. Strong blow on 2nd open, decreased to weak in 30" and increased to strong in 60". No gas to surface. Recovered 60 feet of mud.

ISIP 53# FSIP 448#
FP 42-31# 53-42#

SAMPLE TOPS

Herington	1325 (+180)
Krider	1348 (+157)
Heebner	3123 (-1618)
Lansing	3346 (-1841)
Kansas City	3614 (-2109)
Stark Shale	3762 (-2257)
Hertha porosity	3805 (-2300)
Total Depth	3809 (-2304)

11-07-77 Drilling @ 2070'.

11-08-77 Drilling @ 2896'.

11-09-77 Drilling @ 3500'.

11-10-77 Taking DST #2 @ 3794-3809'.

1 1/2 West of Rd 70

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CEMENTING SERVICE REPORT

15-095-20647-0000



DOWELL DIVISION OF DOW CHEMICALS
AN OPERATING UNIT OF THE DOW CHEMICAL COMPANY

TREATMENT NUMBER	1313	DATE	6-21
STAGE	DOWELL DISTRICT		

DWL-496-N PRINTED IN U.S.A.

WELL NAME AND NO. <i>Arthurs</i>		LOCATION (LEGAL) <i>Sec 6-30-7</i>		RIG NAME:	
FIELD-POOL		FORMATION		WELL DATA:	
COUNTY/PARISH <i>Franklin</i>		STATE <i>Kansas</i>		API. NO.	
NAME <i>M. Day</i>		AND		ADDRESS	
ZIP CODE		SPECIAL INSTRUCTIONS <i>Why to ...</i>		SPECIAL INSTRUCTIONS <i>1313 A 312 P&L</i>	

BIT SIZE		CSG/LINER SIZE		BOTTOM		TOP	
TOTAL DEPTH		WEIGHT					
<input type="checkbox"/> ROT <input type="checkbox"/> CABLE		FOOTAGE					
MUD TYPE		GRADE					
<input type="checkbox"/> BHST <input type="checkbox"/> BHCT		THREAD					
MUD DENSITY		LESS FOOTAGE SHOE JOINT(S)				TOTAL	
MUD VISC.		DISP. CAPACITY					

NOTE: INCLUDE FOOTAGE FROM GROUND LEVEL TO HEAD IN DISP. CAPACITY			
SHOE	FLOAT	STAGE TOOL	
TYPE	DEPTH	TYPE	DEPTH
TYPE	DEPTH	TYPE	DEPTH

HEAD & PLUGS		<input type="checkbox"/> TBG		<input type="checkbox"/> D.P.		SQUEEZE JOB	
<input type="checkbox"/> DOUBLE		SIZE		TOOL		TYPE	
<input type="checkbox"/> SINGLE		<input type="checkbox"/> WEIGHT		DEPTH			
<input type="checkbox"/> SWAGE		<input type="checkbox"/> GRADE		TAIL PIPE: SIZE		DEPTH	
<input type="checkbox"/> KNOCKOFF		<input type="checkbox"/> THREAD		TUBING VOLUME		Bbls	
TOP <input type="checkbox"/> R <input type="checkbox"/> W		<input type="checkbox"/> NEW <input type="checkbox"/> USED		CASING VOL. BELOW TOOL		Bbls	
BOT <input type="checkbox"/> R <input type="checkbox"/> W		DEPTH		TOTAL		Bbls	
ROTATE		RPM		RECIPROCATE		FT	
NO. OF CENTRALIZERS				ANNUAL VOLUME		Bbls	

TIME	PRESSURE		VOLUME PUMPED BBL		JOB SCHEDULED FOR			ARRIVE ON LOCATION		LEFT LOCATION	
0001 to 2400	TBG OR D.P.	CASING	INCREMENT	CUM	INJECT RATE	FLUID TYPE	FLUID DENSITY	TIME	DATE	TIME	DATE

TIME	TBG OR D.P.	CASING	INCREMENT	CUM	INJECT RATE	FLUID TYPE	FLUID DENSITY	SERVICE LOG DETAIL			
1:30								PRE-JOB SAFETY MEETING:			
								Start Trucks & mix to ...			
								START 12:45			
								mix to ...			
								START 1:00			
								Drops down			
								mix to ...			
1:45								Moment mixed			

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REMARKS

SYSTEM CODE	NO. OF SACKS	YIELD CU. FT/SK	COMPOSITION OF CEMENTING SYSTEMS				SLURRY MIXED	
							BBLs	DENSITY
1.	150	1.05	A-350 P&L				2.8	
2.								
3.								
4.								
5.								
6.								

BREAKDOWN FLUID TYPE		VOLUME		DENSITY		PRESSURE		MAX.		MIN.	
<input type="checkbox"/> HESITATION SQ.		<input type="checkbox"/> RUNNING SQ.		CIRCULATION LOST		<input type="checkbox"/> YES <input type="checkbox"/> NO		CEMENT CIRCULATED TO SURF.		<input type="checkbox"/> YES <input type="checkbox"/> NO	
BUMP PLUG TO		PSI		DISPLACEMENT VOL.		Bbls		TYPE OF WELL		<input type="checkbox"/> STORAGE <input type="checkbox"/> INJECTION	
WASHED THRU PERFS		<input type="checkbox"/> YES <input type="checkbox"/> NO		TO		FT		<input type="checkbox"/> OIL <input type="checkbox"/> GAS		<input type="checkbox"/> BRINE WATER <input type="checkbox"/> WILDCAT	
PERFORATIONS		TO		TO		CUSTOMER REPRESENTATIVE		DOWELL SUPERVISOR			