STATE OF KANSAS STATE CORPORATION COMMISSION	WELL PLUGGING R . K.A.R82-3-		AP! NUMBER 15-097-21,027-0000			
'200 Colorado Derby Building Michita, Kansas 67202			LEASE NAMEGrey & Grey			
pecelVED	RECEIVED STATE CORPORATION COMMISSION STATE CORPORATION COMMISSION And return to Cons. Div.		WELL NUMBER11			
STATE CORPORATION COMMISSION						
TOCT 2 9 1984 10-	office within 30 days. 10-29-84			330 Ft. from E Section Line		
LEASE OPERATION Grey			SEC. 18 TWP. 29 RGE. 18 (≰)or(<u>W)</u>			
ADDRESS Rt. 1 Box 47; Greensburg, Kansas 67054			COUNTY _	COUNTY Kiowa		
PHONE# (316, 723-3123 OPERA	tors license no. <u>85</u>	65	Date Wel		_	
Character of Well D & A			Plugging Commenced 9/14/84			
(Oil, Gas, D&A, SWD, Input, Wa	ter Supply Well)		Plugging	Completed <u>9/14/84</u>	_	
Did you notify the KCC/KDHE Jo	int District Office	prior to	plugging 1	this well? yes	_	
Which KCC/KDHE Joint Office di	d you notify? <u>Dodge</u>	City			<u> </u>	
Is ACO-1 filed? no If	not, is well log at	tached?	yes			
Producing Formation <u>none</u>	Depth to To	p <u>none</u>	Botto	om_noneT.D4765		
Show depth and thickness of al	l water, oil and gas	formatio	ns.		•	
OIL, GAS OR WATER RECORDS	1	CA	SING RECOF	RD		
Formation Content none none	From To none		Put In none	Pulled out none	_	
					_	
Describe in detail the manner placed and the method or metho	ds used in introduci	ng It into	o the hole	. If cement or other pl	↓ ₩as ugs	
were used, state the character Halliburton arrived on th 3% Calcium Chloride W/150,4 sa	of same and depth p <u>e job to plug the we</u>	laced, fr <u>ll. Usin</u>	om <u>feet t</u> g 150 60-4	ofeet each set. O Pozmix Cement W/2% Ge	1.	
3% Calcium Chloride W/150,4 sa 30 sacks to pull top 411 Surfa	cks, Started Plug wi ce casing 8 5/8 to d	th 50 saclepth of 4.	ks 📭 1170 11.	70 sacks e 570, use		
(If additional desc	ription is necessary	, use BAC	K of this	form.)		
Name of Plugging Contractor Ha				.icense No. 5287		
Address P. O. Box 963, Pratt,						
STATE OF Kansas	COUNTY OF <u>Kiow</u>	va	-	, SS.		
Huey P. Grey		(Emp	loyee of C	perator) or (Operator)	o f	
above-described well, being fi statements, and matters herein the same are true and correct,	contained and the lo	og of the	above-des	cribed delt as filed th	ts, at	
				Box 47, Greensburg, KS 6	7054	
SUBSCRIBED AN	D SWORN TO before me	this 26	oth day o	f_October, 19_8	4	
	(rystal	a. B.t.	laff		
My Commission	Expires: April 12,		No ۈ	ryWPublic		

Crystal A. Retzlaff
NOTARY PUBLIC
State of Kansas
MY APPT. EXPIRES 4-12-88

Form CP-4 Revised 08-84