STATE OF KANSAS STATE CORPORATION COMMISSION 200 Colorado Derby Building

3816

WE	LL	P	LUI	3G I	NG	R	Ε	C	OR	D
			•	_	^	77		٠	-	

API NUMBER 15-095-21478-0000

Wichita, Kansas 67202	LEASE NA	LEASE NAMEHEPW Woolridge						
	TYPE OR PRIN NOTICE: Fill out co and return to Co office within 30	WELL NUMBER #2 Ft. from S Section Line						
	VIII		Ft. from E	Sectio	n Line			
LEASE OPERATOR Oil Producers	Inc. of Kansas	 .	sec. <u>16</u>	TWP. 27S RGE	<u>7</u> X⊉	3 or (W)		
ADDRESS Box 8647, Wichita,	COUNTY _	Kingman	1					
PHONE (316) 681-0231 OPERA	tors License No. 80	61	Date Wel	1 Completed	<u> </u>			
Character of Well <u>Gas</u>	•		Plugging	Commenced _				
(OII, Gas, D&A, SWD, Input, Wa	ter Supply Well)		Plugging	Completed	10:20	10-17		
Did you notify the KCC/KDHE Jo	int District Office	prior to	plugging t	his well?	yes	- 1		
Which KCC/KDHE Joint Office di	d you notify? Di	strict #	2		· · · · · · · · · · · · · · · · · · ·			
is ACO-1 filed? yes if								
Producing Formation				ом 3 <u>817</u> т.	D. 388	30		
Show depth and thickness of al	•			······································				
OIL, GAS OR WATER RECORDS	1		SING RECOR					
Formation Content	[From To]	,	- ;	Pulled out				
	11000	8 5/8	210		:			
		43	_3880	2338.	70			
Describe in detail the manner placed and the method or methowere used, state the character Bottom. Pump 30 sks commpos. mix. Max 450 Shut	ds used in introducion of same and depth ponto 2900'. To	ing it int placed, fr	o the hole om feet t	o. If coment	or oth	er plugs		
(If additional desc	ription is necessary	y, use BAC	K of this	form.)				
Name of Plugging Contractor <u>G</u>	reat Bend Casing	<u>Pullers</u>	. Inc. L	icense No	4635 (CP		
Address Box 768, Great Ben								
STATE OF Kansas	county ofBa	rton		,55.		E ge F d		
Terry W. Wagner		(Emp	loyee of C	-)perator) or	(Opera	tor) of		
above-described well, being fi statements, and matters herein the same are true and correct,	contained and the l so help me God.	log of the Signature)	above-des	cribed well	as fil	ed that		
	(/	Address)	Box 768,	Great Ben		nsas 67540		
"SUBSCRIBED AN	D SWORN TO before me	e this <u>1</u>	9th day o	f November		19 87		
		Louee			*			
MY Commission My Commission MOTARY PUBLIC - State of Kansas LOVELLA L. MULLEN	Expires: 1-13-9	0	. HEL	ENVERPLIC ATION COMMISSION		orm CP-		
Sppt. Exp. 1-13-90		·	NOV :	2 0 1987		ed 08-84		

NOV 2 0 1987 11 - 20 - 1987 CONSERVATION DIVISION Wichita, Kansas