To: 1 090452

8-8

STATE CORPORATION COMMISSION
CONSERVATION DIVISION - PLUGGING SECTION
200 COLORADO DERBY BUILDING
WICHITA, KANSAS 67202

API NUMBER 15- 057-20,268-0000

N/2 NW SE, SEC. 32, T 29 S, R 24 W,

2320 feet from S section line

2000 feet from E section line

TECHNICIAN'S PLUGGING REPORT

Operator License # 5123

Lease Name Dufford A Well # 1

Operator: Name & Address: Pickrell Drilling Co., Inc.
110 N. Market, Ste. 205
Wichita, KS 67202

County Ford

Well Total Depth 5450 177.13 ft

Conductor Pipe: Size _____ feet _____

Surface Casing: Size 8 5/8 feet 507

Abandoned Oil Well _____ Gas Well X Input Well _____ SWD Well _____ D&A _____

Other well as hereinafter indicated _____

Plugging Contractor Kelso Casing Pulling, Inc. License Number 6050

Address P.O. Box 347, Chase, KS 67524

Company to plug at: Hour: 2:40 p.m. Day: 8 Month: 8 Year: 19 94

Plugging proposal received from Richard

(company name) Kelso Casing Pulling, Inc. (phone) 316-938-2943

were: 4½" at 5444' w/150 sx cement, PBTD 5376', Perfs at 5273-77'

1st plug sand back to 5220' and dump 4 sx cement on top of sand through bailer,

2nd plug pump 3 sx hulls, 10 sx gel, 50 sx cement, 15 sx gel, 1 sx hulls, release 8 5/8" wiper plug and pump 175 sx cement.

Plugging Proposal Received by Steve Middleton
(TECHNICIAN)

Plugging Operations attended by Agent?: All X Part _____ None _____

Operations Completed: Hour: 3:15 p.m. Day: 8 Month: 8 Year: 19 94

ACTUAL PLUGGING REPORT 1st plug sanded back to 5220' and dumped 4 sx cement on top of sand through bailer,

2nd plug pumped 3 sx hulls, 10 sx gel, 50 sx cement, 15 sx gel, 1 sx hulls, released 8 5/8" wiper plug and pumped 175 sx cement.

Maximum pressure 400 psi and shut in 200 psi.

RECEIVED
STATE CORPORATION COMMISSION
AUG 11 1994
CONSERVATION DIVISION
WICHITA, KANSAS

Remarks: Used 60/40 Pozmix 6% gel by Allied. Recovered 2900' of 4½" casing.

(If additional description is necessary, use BACK of this form.)

I (did / ~~did not~~) observe this plugging.

INVOICED

DATE 9-5-94

INV. NO. 41085

Signed _____ (TECHNICIAN)

FORM
Rev.