

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

WELL PLUGGING RECORD
K.A.R.-82-3-117

API NUMBER 15-151,20-235-0000

LEASE NAME Kinzie

WELL NUMBER #1

TYPE OR PRINT
NOTICE: Fill out completely
and return to Cons. Div.
office within 30 days.

2310 Ft. from S Section Line

4290 Ft. from E Section Line

SEC. 23 TWP. 29 RGE. 13 (E) or (W)

COUNTY Pratt

LEASE OPERATOR John O. Farmer, Inc.

ADDRESS Box 352, Russell, Kansas 67665

PHONE# (913-483-3144) OPERATORS LICENSE NO. 5135

Date Well Completed _____

Character of Well Oil

Plugging Commenced 9-5-91

(Oil, Gas, D&A, SWD, Input, Water Supply Well)

Plugging Completed 9-16-91

The plugging proposal was approved on September 16, 1991 (date)

by Steve Pfeifer (KCC District Agent's Name).

Is ACO-1 filed? _____ If not, is well log attached? With application

Producing Formation _____ Depth to Top _____ Bottom _____ T.D. 4712'

Show depth and thickness of all water, oil and gas formations.

RECEIVED
STATE CORPORATION COMMISSION

OIL, GAS OR WATER RECORDS

CASING RECORD

Formation	Content	From	To	Size	Put In	Pulled out
				10-3/4"	226'	None
				5-1/2"	4689'	2023.16'

SEP 19 1991

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

Dumped sand to 4380' and 5 sacks cement. Shot casing at 4506', 4016', 3513', 3014', 2717', 2526', 2331' and 2014'. Pulled 62 joints of 5-1/2" casing. Halliburton plugged well with 300# hulls, 10 sacks gel, 40 sacks cement, 10 sacks gel, 100# hulls and 11 sacks 60/40 pozmix with 6% gel, Maximum pressure was 400 psi and shutin 150 psi.

Name of Plugging Contractor Rockhold Engineering, Inc. License No. 5111

Address Box 698, Great Bend, Kansas 67530

NAME OF PARTY RESPONSIBLE FOR PLUGGING FEES: John O. Farmer, Inc.

STATE OF Kansas COUNTY OF Barton, ss.

James W. Rockhold (Employee of Operator) or (Operator) of 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 that the same are true and correct, so help me God.

(Signature) James W. Rockhold
James W. Rockhold
(Address) Box 698, Great Bend, Ks. 67530

SUBSCRIBED AND SWORN TO before me this 17th day of September, 1991

My Commission Expires: _____

STATE NOTARY PUBLIC
KANSAS
IONA M. LEATHERMAN
Barton County, Kansas
My Appt. Exp. 4-16-91

Iona M. Leatherman
Notary Public