

STATE CORPORATION COMMISSION
200 Colorado Darby Building
Wichita, Kansas 67202

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

API NUMBER 15-097-20386-0000

LEASE NAME Weaver-Patrick

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

WELL NUMBER 1

330 Ft. from S Section Line

1250 Ft. from E Section Line

SEC. 23 TWP. 27 RGE. 18 (E) or (W)

COUNTY Kiowa

LEASE OPERATOR Oil Producers, Inc. of Kansas

ADDRESS P.O. Box 8647, Wichita, Kansas 67208

PHONE# (316) 672-6373 OPERATORS LICENSE NO. 8061

Character of Well oil

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

Date Well Completed 03-28-77

Plugging Commenced 10-16-95

Plugging Completed 10-17-95

The plugging proposal was approved on 10-16-95 (date)

by Steve Pfeifer (KCC District Agent's Name)

Is ACO-1 filled? yes if not, is well log attached?

Producing formation _____ Depth to top 4151 Bottom 4722 r.c. 4773

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
	Surface			8 5/8"	415	0
	Production			4 1/2"	4772	2356'

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 plug were used, state the character of same and depth placed, - from feet to feet each set
Bottom plug; sanded off to 4100' 4 sks of cement. Halliburton pumped 300 lbs. hulls. Pumped 10 sks of gel. Pumped 50 sks of cement. Pumped 10 sks gel. Pumped 100 lbs hulls. Released 8 5/8" wood plug. Pumped 150 sks cement. 650 maximum pressure 225 shut in pressure.

RECEIVED
STATE CORPORATION COMMISSION

Name of Plugging Contractor D.S. & W. Well Servicing, Inc. License # 6901

Address P.O. Box 231, Claflin, Kansas 67525

OCT 31 1995 10-20-95

NAME OF PARTY RESPONSIBLE FOR PLUGGING FEES: Oil Producers, Inc. of Kansas

CONSERVATION DIVISION
Wichita, Kansas

STATE OF Kansas COUNTY OF Barton, ss.

Joseph F. Strube (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 the the same are true and correct, so help me God.

(Signature) Joseph F. Strube

(Address) P.O. Box 231, Claflin, Kansas 67525

SUBSCRIBED AND SWORN TO before me this 18th day of October, 19 95

Karlynn K. Beck
Notary Public

My Commission Expires: 09-29-98

USE ONLY ONE SIDE OF EACH FORM



Form CP-4
Revised 05-88