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

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

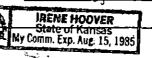
API NUMBER 15-185-21941-0000
LEASE NAME Chappell #1
WELL NUMBER 11/2 11/2 NE//

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

CASI	L NAME	<u>`</u> `	JIIGPP.		- 11 1	
YELL	NUMB	ER <u>1</u>	1/2 W	/2	NE/4	
	'	F†.	from	s	Section	Line

	LICO ALT	וכ חוח	u days.		Ft. from E Section Line			
LEASE OPERATOR Brougher Oil Co.		TWP. 25s RGE. 14w (E) or (W)						
ADDRESS Drawer 1367, 614 Patton Ro								
PHONE#(316) 793-5610 OPERATORS LICENSE NO. 6393					il Completed			
Character of Well		g Commenced <u>4/30/85</u>						
(Oil, Gas, D&A, SWD, Input, Water Sup								
Did you notify the KCC/KDHE Joint Dis	•							
Which KCC/KDHE Joint Office did you r				•	,			
,					400.			
Is ACO-1 filed?If not,	is well	log a	ttached?		CELVED COMMESSION			
Producing Formation	Depth	to To	ор	Bott	om 27 004400			
Show depth and thickness of all water	oil a	nd gas	s formati	ons.	STATE COM VI TUBO			
Is ACO-1 filed?If not,  Producing Formation  Show depth and thickness of all water  OIL, GAS OR WATER RECORDS	[		С	ASING RECO	Pulled outons Wiching Kanage			
Formation Content	From	To	Size	Put in	Pulled out ONS WICHES HO			
	<u>-</u>		8 5/8	3381	none			
			55"	4399'	24 14 1			
				<u> </u>				
Describe in detail the manner in which placed and the method or methods used were used, state the character of same Plugged bottom with sand to	in into ne and de 3645 8	roduc epth   & 5 sa	ing it in placed, f acks ceme	to the hole romfeet nt. Shot p	e. If cement or other plugs tofeet each set. pipe at 3412', 3010', 2806'			
2685', 2562', & 2414'. Pu	11ed 60	joint	ts of pip	e Pumped	3 hulls, 10 gel, 50 cement			
10 gel, 1 hull, 8 5/8 plus Plugging complete	<u> </u>	sacks	<u>cement</u>	(60/40 poz	2% gel 3% c.c.).			
(If additional description	is nec	essar	y, use <u>BA</u>	CK of this	form.)			
Name of Plugging ContractorKelso	Casing I	Pullir	ıg	·	License No. 6050			
Address Box 347, Chase, Ks. 67	524	_						
STATE OF Kansas COU	JNTY OF _	<del></del>	Rice		_,ss.			
R. Darrell KElso			( Fm	plovee of	Operator) or (Operator) of			
above-described well, being first du statements, and matters herein conta	ined and	the	ath, says	: That I h	ave knowledge of the facts,			
the same are true and correct, so hel	ip me God	d. (:	Signature	Pha	we flo			
		( )	Address)		Chase, Ks. 67524			
SUBSCRIBED AND SWORN TO before me this 15th day of May ,1985								
				Alme	Horve			

My Commission Expires:



Form CP-4 Revised 08-84

Notary Public