

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

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

API NUMBER 15-047-20068-0000

LEASE NAME Zuercher

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

WELL NUMBER 1

990 Ft. from S Section Line

330 Ft. from E Section Line

SEC. 8 TWP. 25 SRGE. 16 (E) or (W)

COUNTY Edwards

Date Well Completed \_\_\_\_\_

Plugging Commenced 07-17-95

Plugging Completed 07-18-95

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, D&A, SWD, Input, Water Supply Well)

The plugging proposal was approved on 07-17-95 (date)

by Duane Rankin (KCC District Agent's Name).

Is ACO-1 filled? Yes If not, is well log attached? \_\_\_\_\_

Producing Formation Kinderhook Depth to Top 4286 Bottom 4294 T.D. 4345

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"		
	Production			5 1/2"	4337'	2330'

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 4236'. 5 sks cement. Allied pumped 300 lbs. of hulls 10 sks of gel, 50 sks of cement, 10 sks gel 100 lbs of hulls. Released plug, pumped 125 sks of cement. Shut in maximum pressure 400 lbs. Minimum pressure 100 lbs.

Name of Plugging Contractor D.S. & W. Well Servicing, Inc. License No. 6901

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

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

STATE OF Kansas COUNTY OF Barton

Arthur P. 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) Arthur P. Strube

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

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

Karlynn K. Beck Notary Public

My Commission Expires: 09-28-98

USE ONLY ONE SIDE OF EACH FORM

