

STATE OF KANSAS  
ATE CORPORATION COMMISSION  
D. S. Market, Room 2078  
Chilta, KS 67202

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

15-185-20893-0001

Docket D-20,160

API NUMBER \_\_\_\_\_

LEASE NAME Mc Cune

WELL NUMBER 4

1650 Ft. from S Section Line

990 Ft. from E Section Line

SEC. 4 TWP. 25S RGE. 12W (E) or (W)

COUNTY Stafford

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

Plugging Commenced 12-8-97

Plugging Completed 12-11-97

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

EASE OPERATOR Rama Operating Co., Inc.

DRESS P.O. Box 159 Stafford, Kansas 67578

PHONE#(316) 234-5191 OPERATORS LICENSE NO. 3911

Character of Well SWD

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

The plugging proposal was approved on \_\_\_\_\_ (date)

by Scott Alberg (KCC District Agent's Name).

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

Producing Formation \_\_\_\_\_ Depth to Top \_\_\_\_\_ Bottom \_\_\_\_\_ T.O. 4250'

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
				8-5/8"	305'	None
				5-1/2"	4176'	1800'

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 material is used, state the character of same and depth placed, from \_\_\_\_\_ feet to \_\_\_\_\_ feet each section. Plugged off bottom with sand to 3650' and 5 sacks cement. Shot pipe loose @1800'.

Ran 700' of 2" tubing and pumped 5 sks. gel, 50 sks. cement w/2 sks. CC H2O, pulled up to 330', pumped 50 sks. cement mixed w/1 sk. CCH2O, pulled up to 40' and mud circulated 23 sks. cement to surface., 60/40 pos, 6% gel. Plugging Complete.

Name of Plugging Contractor Mike's Testing & Salvage, Inc. License No. 31529

Address P.O. Box 467 Chase, Kansas 67524 12-18-97

Name of Party Responsible for Plugging Fees: Rama Operating Company, Inc.

State of Kansas County of Rice, ss.

Mike Kelso (Employee of Operator) or (Operator)

above-described well, being first duly sworn on oath, says: That I have knowledge of the facts and statements, and matters herein contained and the log of the above-described well as filed in the same are true and correct, so help me God.

(Signature) Mike Kelso

(Address) P. O. Box 467 Chase, KS 67524

SUBSCRIBED AND SWORN TO before me this 17th day of December, 19 97

Irene Herzberg  
Notary Public

My Commission Expires:

