STATE OF KANSAS 'STATE CORPORATION CO		WELL PLUGGING RECORD K.A.R82-3-117			AF-10MBER - 20927-60-00		
130 S. Market, Room 20					LEASE N	AME Turner	
Wichita, KS 67202	ta, KS 67202				WELL NUMBER1		
			ill out completely turn to Cons. Biv.		•		Section Line
•		ffice si				_	
LEASE OPERATOR Turnco Drilling, Inc.					Ft. from E Section Line SEC. 26 TWP. 25S RGE. 17 (EXSEXW)		
ADDRESS 3900 Broadway Great Bend, Ks. 67530					•	Edwards	
PHONE (316) 792-2441 OPERATORS LICENSE NO. 30517							10-20-96
Character of Well Gas					Pluggin	besnommod t	4-15-96 
(OII, Gas, D&A, SMD, Input, Water Supply Well)					Plugging	_betolqmcO	4-17-96
The plugging proposal	was approved (	on	···			•	(date)
by					(X G	C District Ad	iontis Name).
Is ACO-1 filed?							
Producing Formation		tqe0	h to To	pp	Botto	T. [	4600'
Show depth and thickne	ss of all wate	er, oll	and gas	formati	ons.		
OIL. GAS OR WATER REC	ORDS	J		c.	ASING RECOF	RD	
	١	less	172	<del></del>	-/		RPORATION COMMISSI
Formation Con	rent	From	To		PUT IN	- I advisour	4-19-96
		\	_	8 5/8"	388'	none 2166 AF	<del>R 1 9 1998 -</del>
		<u> </u>	_	4 1/2"	45991	2166	17 10 1000
Describe in detail the		ch the		s alugge	Indicat	ng whose Ltha	ERWARIONEDIVIGION .
boftem eft bas bessig	or methods us	ad in l	ntroduc	ing It I	nto the hol	ie. If cament	World other pl
were used, state the Plugged off bottom w	character of ith sand to 43	<b>f samo</b> a 50' and	<b>and de</b> 4 sacks	pth plac s cement.	<b>≎d, from_</b> Shot well	<b>_feet to</b> _at 2606'- @2	<b>feet each s</b> / 2414' <sub>-</sub> 02307'
and at 2166'. Pulle	d casing up to	1150° p	umped 8	3 sacks ge	el. 50 sack	s_cement. nu	Lled up to
415' pumped 50 sacks 6% gel) Plugging co	<u>cement, pulle</u> mplete.	d casing	topped	d off with	ı 10 sacks	cement. (60/4	10 POZMIX
	<del></del>			,			
Name of Plugging Contr	actor Mike	s Test:	ing_&	Salvage	Inc. l	.icanse No3	1529
Address P.O. Box 2				sas 675:			
						- 31	
NAME OF PARTY RESPONSE	BLE FOR PLUGG	ING FEES	* Mike	's Testing	& Salvage	, Inc. Cha	ase, Ks.
STATE OF Kansas	cr	DUNTY OF	Ri	.ce	- <u></u>	_, 55.	
Mi	ke Kelso			C	Employee of	· Operator) o	or (Operator)
above-described well,	being first du			th, says:	: That I ha	ve knowledge	of the fac-
statements, and matt the same are true and				a log of	rne above-0	lescribed well	i as filed t
•	-			erutengl	MAL.	Melle-	<del>~~</del>
	, ,		. (1	\ddress)	P.O. Box	209 Chase, K	ansas 67524
SUBSC	RIBED AND SHOP	.' RN TO bæ	fore m	o this	L8th day o	o∱ April	.19 96
						5/2: /-	<del></del> -
			_		Nota	THE PUBLIC	<i>g</i>
. My Co	mmission Expir	*05:					

IRENE HERZBERG State of Kansas My Appt. Exp. Aug. 24, 1997

Revised 05~