

STATE CORPORATION COMMISSION
200 Colorado Derby Building
Wichita, Kansas 67202

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

API NUMBER 15-047-20553-0000

LEASE NAME Turner

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

WELL NUMBER 1

4950 Ft. from S Section Line

2970 Ft. from E Section Line

SEC. 35 TWP. 24 RGE. 16 (E) or (W)

COUNTY Edwards

Date Well Completed 09-79

Plugging Commenced 09-25-95

Plugging Completed 09-25-95

LEASE OPERATOR Oil Producers, Inc.

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 09-25-95 (date)

by Steve Pfeifer (KCC District Agent's Name).

Is ACO-1 filed? Yes If not, is well log attached? N/A

Producing Formation Kansas City Depth to top 4290' Bottom 4314' r.c. 4375'

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"	364	0
	Production			4 1/2"	4374'	2337'

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 4240' 4 sks of cement. Allied mixed and pumped 300 lbs. of hulls, 10 gel and 50 sks cement. Mixed 10 gel, 100 lbs. of hulls and released plug. Mixed 150 sks of cement (Shut in pressure 200 lbs.) Maximum pressure 500 lbs.

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

Address P.O. Box 231, Claflin, Kansas 67525 9-29-95

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

STATE OF Kansas COUNTY OF Barton **RECEIVED**
STATE CORPORATION COMMISSION

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, and I filed the the same are true and correct, so help me God.

(Signature) Joseph F. Strube

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

SUBSCRIBED AND SWORN TO before me this 28th day of September, 19 95

Karlynn K. Beck
Notary Public

My Commission Expires: 09-28-98.

USE ONLY ONE SIDE OF EACH FORM

