STATE OF KANSAS

STATE CORFORATION COMMISSION

WELL PLUGGING RECORD

K.A.R.-82-3-117

API NUMBER 15-185-22,119-6000 20

200 Colorado Derby Building Wichita, Kansas 67202					LEASE N	LEASE NAME Newell	
	TYPE (R PRI	NT	WELL NU	WELL NUMBER 1-31		
NOTICE: Fill out and return to office within						Ft. from S Section Line	
						- •	
	•					Ft. from E Section Line	
LEASE OPERATOR Ted's Consulting Service					SEC. <u>31</u>	TWP. 245RGE. 11W(E)or(W)	
318 N. Ninnescah ADDRESS Pratt, KS 67124					COUNTY	Stafford	
PHONE#(316) 672-7838 OPERATORS LICENSE NO. 3476					Date We	Completed	
Character of Well Oil RECEIVED RECEIVED (011, Gas, D&A, SWD, Input, Water Supplication of State of St					Pluggin	g Commenced 10/24/88	
(Oll, Gas, D&A, SWD, Input, Water Supplication (Oll) Gas, D&A, SWD, Input, Water Supplication (Oll) (O					Pluggin	g Completed 11/15/88	
The plugaina pro	posal was approve	<i>ςτμικ</i>	1 268	688		(date)	
hv	oposal was approve	- 1//0.	- 28	ROUSION	(KC	C District Agent's Name).	
15 ACO-1 #11 ad?	lf no	+ 1c wa CNN	SERVATI	K ^{SUSBE}		C District Agent's Name).	
	 (' "°	.,	Man				
Producing Format	·lon	Uepth	10 1	ор	BOTT	omT.D4125	
Show depth and i	hickness of all w	ater, oil a	ınd ga	s formati	ons.		
OIL, GAS OR WAT	ER_RECORDS			<u>c</u>	ASING RECO	RD	
Formation.	Content	From	То	Size	Put In	Pulled out	
			-	8 5/8	344	none	
}			·	4 1/2	4110	2655	
were used, sta Plugged b 2655', pl 100# hull	te the character ottom with sand ugged surface ws, 100 sacks ce	of same a to 3460 ith 400# ment.	nd de ', ra hull	pth plac n 4 sacl s, 10 ge	ed, from ks cement el, 50 sa CK of this	le. If cement or other plue feet to feet each seed, shot @2972', 2812', locks cement, 10 gel,	
Name of Plugging	Contractor Kel	so Casing	Pul	ling, In	С.	License No. 6050	
Address <u>P.O.</u>	Box 347						
NAME OF PARTY RE	SPONSIBLE FOR PLUC	GGING FEES:		Ted's (Consultin	g Service	
STATE OF Ka	insas	COUNTY OF	1	Rice		,ss.	
	Daniel Vales					- - (00000000000000000000000000000000000	
above-described statements, and		contained a	nd the	ath, says:	That I hat the above-	f Operator) or (Operator) ave knowledge of the fact described well as filed th 7	
			(,	Address)	Р.О. Вох	347 Chase, KS 67524	
	SUBSCRIBED AND SV	VORN TO bef	ore m	e this 2	lst' day	November ,188	
·	My Commission Exp	olrest .	SILLEY OF THE PARTY OF THE PART	195745 HO State of K My Appt. Exp. Au	OVER enegs	ary Public . Form CP-	

Form CP-4 Revised 05-88