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

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

API NUMBER 15-151-20.907-00

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LEASE	NAME	Mowbray		

WELL NUMBER 2A

TYPE OR P	RINT
NOTICE: FIII out	completely
and return to	Cons. Div.
office within	30 davs.

1650 Ft. from S Section Li

2310 Ft. from E Section Li

LEASE OPERATOR Great Bend Casing Pullers, Inc.					SEC.29 TWP.26 RGE.13 XX)or(
ADDRESS P.O. Box 251, Great Bend, Kansas 67530						COUNTY <u>Pratt</u>					
PHONE#(316)793-9711 OPERATORS LICENSE NO. 4635 Date Well Completed NA											
Character of Well Oil					Plugging Commenced 8_4_92						
(OII, Gas, D&A, SW	Plugging	Completed	2:00	PM							
The plugging propo	The plugging proposal was approved on 8-4-92 (date										
by Steve Pfeif					(KC	District A	gentis	Name)			
ls ACO-1 filed? Yes If not, is well log attached?											
						om <u>4298</u> T.	D. 452	9			
Producing Formation NA Depth to Top 4290 Bottom 4298 T.D. 4529 Show depth and thickness of all water, oil and gas formations.											
OIL, GAS OR WATER RECORDS CASING RECORD											
								. 1			
Formation	Content	From	То	Size ·	Put In	Pulled out		Y.			
				8 5/8		0		-1			
		·	ļ,	5 1/2	4529	2107		3. 0			
<u></u>	-	·						77 Q			
Describe in detail	the manner in which	h the we	ell wa	s plugged	, indicati	ng where the	e mud 1	fluld			
	thod or methods us										
	the character of inded to 4240 & b					_feet to	_fee† e	ach			
Top plug: Pumpe	ed 300 lbs Hulls,	10 ev	Cel	50 ev C	ement 10) sx Gel,	100 lk	s i			
Hulls, 8 5/8 Wi	per plug, 100 sx	60/40	6% G	el. 150	maximum	pressure	&	148			
100 lbs shut in	itional description	15 500			Y of this	form)					
							4605	0			
Name of Plugging C	ContractorGreat	Bend (Casin	g Puller	s, Inc.	icense No	4635	CP S			
Address Box 251, Great Bend, Kansas 67530											
NAME OF PARTY RESP	ONSIBLE FOR PLUGGI	NG FEES:	Grea	t Bend C	asing Pul	llers. Inc		• 0			
STATE OF Kansas	CO1	JNTY OF _	В	arton	- 	,55.		t			
Gary G.	Burke			<i>(</i> F	, mplovee of	Operatori	or (Ope	araton			
dary G. Burke (Employee of Operator) or (Operator) above-described well, being first duly sworn on oath, says: That I have knowledge of the fa											
statements, and matters herein contained and the log of the above-described well as filled											
the same are true	and correct, so hel	ip me God	1.		· K		つ。 //	1/1			

(Signature)

Great Bend RECKAREAS Box 251, (Address) August SUBSCRIBED AND SWORN TO before me this day of

> Public Wichita, Kansas Notary

Form

ON COMMUNICATION

NOTARY PUBLIC - State of Kansas ANNA K. BURKE

My Appt Exp. ______ My Commission Expires:_

4-30-96

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