

STATE OF KANSAS
STATE CORPORATION COMMISSION
200 COLORADO DERBY BUILDING
WICHITA, KANSAS 67202

WELL PLUGGING RECORD

API NUMBER 15-095-21418 ⁰⁰⁰⁰

LEASE NAME Schrag

WELL NUMBER #1

SPOT LOCATION W/2-SE/4-NE 4

SEC. 24 TWP 27S RGE. 6 (E)OR(W)

COUNTY Kingmen

DATE WELL COMPLETED _____

PLUGGING COMMENCED 9/26/84

10:00

PLUGGING COMPLETED 10/2/84

TYPE OR PRINT

PLEASE FILL OUT COMPLETELY
AND MAKE REQUIRED AFFIDAVIT.

LEASE OPERATOR M.T.M. Petroleum

ADDRESS Box 82, Spivey, KS 67142

PHONE #(316) 785-4011 OPERATORS LICENSE NO. 6236

CHARACTER OF WELL D-A
(OIL, GAS, D&A, SWD, INPUT, WATER SUPPLY WELL)

DID YOU NOTIFY THE KCC/KDHE JOINT DISTRICT OFFICE PRIOR TO PLUGGING THIS WELL? yes

WHICH KCC/KDHE JOINT OFFICE DID YOU NOTIFY? wichita, KS

IS ACC-1 FILED? _____ IF NOT, IS WELL LOG ATTACHED? yes

PRODUCING FORMATION _____ DEPTH TO TOP _____ BOTTOM _____ T.D. 4220

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	348	None
				5 1/2	3852	3279

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 PLUGS WERE USED STATE, THE CHARACTER OF SAME AND DEPTH PLACED, FROM FEET TO FEET EACH SET. Plug back at 3832

Sand from 3838 to 3715 - 5sx cement with dump bailer, from 3715 to 3680

Allied pumped - 3sx hull, 6sx jell, 135sx cement - 2% jell, 3% CC

Ron Wilson and Elmo Morgenstern on location.

(IF ADDITIONAL DESCRIPTION IS NECESSARY, USE BACK OF THIS FORM.)

NAME OF PLUGGING CONTRACTOR Clarke Corp. LICENSE No. 5105

ADDRESS 107 W. Fowler, Medicine Lodge, KS 67104

STATE OF _____ COUNTY OF _____, SS.

(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 AS FILED THAT THE SAME ARE TRUE AND CORRECT, SO HELP ME GOD.

(SIGNATURE) Elmo P. Morgenstern
(ADDRESS) _____

SUBSCRIBED AND SWORN TO BEFORE ME THIS 3 DAY OF October, 1984

Pamela Ricke

NOTARY PUBLIC

RECEIVED

STATE CORPORATION COMMISSION

10-16-84

OCT 16 1984

FORM CP-4
REVISED 06-83

CONSERVATION DIVISION
Wichita, Kansas

MY COMMISSION EXPIRES: 10-11-87

PAMELA RICKE
NOTARY PUBLIC
STATE OF KANSAS
My Appt. Exp. 10-11-87