KANSAS STATE CORPORATION COMMISSION

S. 1.

TO:

Jewel M. Ogden, Director

## WELL PLUGGING SUPERVISOR'S REPORT

500 Insurance Building 212 North Market √ichita 2, Kansas Location: ME. NE. SW File No. /9\_Twp.\_28\_Rge.\_ County: (E) (W)Name of Field or Pool: Total Depth: 3940 I have this date completed supervision of plugging of: Well No. Lease Operator's Full Name Complete Address: Plugging Contractor: License No. Address: Abandoned Oil Well Gas Well Input Well SWD Well D & A If well is a rotary drilled dry hole did operators wait for you to arrive on L If yes how long Reason: 7:30 Day 3 Operation Completed: Hour The above well was plugged as follows: I hereby certify that the above well was plugged as herein stated and that I was present while the above well was being plugged. Signed: Well Plugging Supervisor I hereby state that I was not present while the above well was being plugged, however, to the best of my knowledge and belief it was plugged as herein stated. A full account for my not being present is as follows: RECEIVED STATE CURPORATION COMMISSION MAY 2 6 1960 CONSERVATION DIVISION Wichita, Kansae Signed: Reviewed: Well Plugging Supervisor Field Supervisor Remarks: /