STATE OF KANSAS STATE CORPORATION COMMISSION 200 Colorado Derby Building	WELL PLUGGING RECORD  K.A.R82-3-117	API NUMBER 15-095-21,610
NOTICE: Fill out and return to		LEASE NAME Dyche
	TYPE OR PRINT NOTICE: FILL out completely	WELL NUMBER 1-10
	and return to Cons. Di office within 30 days.	v. 2270 Ft. from S Section Line
	orrive Printin 30 days.	3010 Ft. from E Section Line
LEASE OPERATOR Shepler & Thor	nas, Inc.	sec. 10 twp. 285 rge. 10 (XX) or (W)
ADDRESSp.O. Box 1162, Libera	al. KS 67905-1162	COUNTY Kingman
PHONE # 816 ) 624-0750 OPERAT	ors License No. 3711	Date Well Completed 3-30-89
Character of Well D & A	•	Plugging Commenced 3-29-89
(Oll, Gas, D&A, SWD, Input, Wat	er Supply Well)	Plugging Completed 3-30-89
Did you notify the KCC/KDHE Joi	nt District Office prior	to plugging this well? Yes
Which KCC/KDHE Joint Office did	you notify? Wichita	
is ACO-1 filed? Yes if	not, \is ⇒veld⇔log rattached	?N/A
Producing Formation N/A	Depth to Top	Bottom Sy T.D. 2575
Show depth and thickness of all		tions. ou N- 29 POS. Ella
OIL, GAS OR WATER RECORDS		CASING RECORD APARTON COMMISSION
Formation Content	From To Size	Put In Proped out ? 1990
	8 5/3	
		215 - Chia Town Divis
placed and the method or method were used, state the character?  Plugged with 60/40 poz, 6% mud to 1000, 35 sx from 100 60' to surface; 10 sx in respectively.	s-used and introducing at a of same and depth placed, gel as follows: mud from 900-2	ged, and doating where the mud-fluid-wa into the tholes of cement or other plug of rom if eet to in feet each set, rom 2575-1650, 35 sx @ 1650-1550; 75, 35 sx from 275-175; mud to usehole. Cut off and cap 3"
below G.L. (If additional descr	iption is necessary, use	BACK of this form.)
Name of Plugging Contractor	BJ-Titan	L1cense No.
Address Medecine Lodge	<u> </u>	
STATE OF KANSAS	COUNTY OF SEWARD	,ss.
R. F. Burke	(	Employee of Operator) or (Operator) of
ctatements and matters becald	st duly sworn on oath, sa contained and the log of	ys: That I have knowledge of the facts the above-described well as filed that
	(Address	P. <u>O. Box 1162, Liberal, KS 67905</u>
My Appt. JEXP.	JODY PE	12th day of April ,19 89
OF KANNEY My Commission	Expires: 1-28-91 V	V
annumin.	•	Form CP-