

API NUMBER 15-047-20214-0000

LEASE NAME Potts

WELL NUMBER 2-5

TYPE OR PRINT  
NOTICE: Fill out completely  
and return to Coes. Div.  
office within 30 days.

1650 Ft. from S Section Line

4290 Ft. from E Section Line

LEASE OPERATOR Oil Producers, Inc. of Kansas

SEC. 5 TWP. 24S RGE. 16W (E) or (W)

ADDRESS P.O. Box 8647, Wichita, Kansas 67208

COUNTY Edwards

PHONE # (316) 672-6373 OPERATORS LICENSE NO. 8061

Date Well Completed \_\_\_\_\_

Character of Well Oil

Plugging Commenced 07-01-97

(Oil, Gas, D&A, SWD, Input, Water Supply Well)

Plugging Completed 07-01-97

The plugging proposal was approved on 07-01-97 (date)

by Scott Alberg District 1 office (KCC District Agent's Name).

Is ACO-1 filed? Yes If not, is well log attached? No

Producing Formation Mississippi Depth to Top 4250' Bottom 4258 T.O. 4258

Show depth and thickness of all water, oil and gas formations.

OIL, GAS OR WATER RECORDS

CASING RECORD

7-10-97

Formation	Content	From	To	Size	Put in	Pulled out
	Surface	0	408	8 5/8"	408	0
	Production		4250	4 1/2"	4250	2292'

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 plug was used, state the character of same and depth placed, from feet to feet each set  
Bottom plug sand and cement 4200'. Allied mixed 300# hulls, 10 gel, and 50 sacks cement, 10 gel, 100# hulls, 8 5/8" wooden plug, 150 sacks cement. Max pressure 800#, shut in 400#.  
Time job started 9:15 am and completed 10:00 am

Name of Plugging Contractor D. S. & W. Well Servicing, Inc. License No. 6901

Address P. O. Box 231, Claflin, Kansas 67525

NAME OF PARTY RESPONSIBLE FOR PLUGGING FEES: Oil Producers, Inc. of Kansas

STATE OF Kansas COUNTY OF Barton, ss.

Arthur Strube (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 therewith, and the same are true and correct, so help me God.

(Signature) Arthur P. Strube

(Address) P. O. Box 231, Claflin, Kansas 67525

SUBSCRIBED AND SWORN TO before me this 9<sup>th</sup> day of July, 1997

Bonnie L. Connell  
Notary Public

My Commission Expires: April 8, 2001

USE ONLY ONE SIDE OF EACH FORM

