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

Character of Well ____ D&A___

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

API NUMBER 15-095-21,560 (7)

LEASE NAME GRAY-LAIRD

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

WELL NUMBER 1

4620 Ft. from S Section Line

1980 Ft. from E Section Line

SEC.15 TWP. 29 RGE. 8W (XXXX (W)

COUNTY Kingman

Date Well Completed 8-14-86

PHONE#(316)_267-6065 __OPERATORS LICENSE NO. __5255

Plugging Commenced 8-14-86

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

LEASE OPERATOR McGinness Oil Company_

Plugging Completed 8-14-86

Did you notify the KCC/KDHE Joint District Office prior to plugging this well? Yes

is ACO-1 filed? No _____if not, is well log attached? No Log was Run ____

Producing Formation ____ Depth to Top ___ Bottom T.D. 4202

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

Which KCC/KDHE Joint Office did you notify? Dodge City

ADDRESS 1026 Union Center Bldg., Wichita, KS

OIL,	GAS	OR	WATER	RECORDS		 CASING	RECORD
						-	

Formation	Content	From	То	Size	Put in	Pulled out
				8-5/8''	296KB	
				 -	 	

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.

1096' -<u>35</u> sacks___ Used 60-40 poz, 6% gel.

346' - 35 sacks 60' - 25 sacks

10 sacks each in rathole and mousehole

(If additional description is necessary, use BACK of this form.)

____License No.___5380 Name of Plugging Contractor <u>Eagle Drilling, Inc.</u>

Address P.O. Box 8609, Wichita, KS 67208

__ COUNTY OF ____ Sedgwick_ STATE OF __ Kansas

Robert L. Eisel, Employee of Operator (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) Drawith Exes

TIFFANY S. LITTLE NOTARY PUBLIC

(Address) P.O. Box 8609, Wichita, KS 67208

STATE OF KANSAS MY APPT. EXPIRES SUBSCRIBED AND SWORN TO before me this 21st day of August ,1986_____

Tillomy & Tittle

Tiffany S. LippleNotary Public

My Commission Expires: August 11, 1989

Form CP-4 Revised 08-84