STATE OF KANSAS STATE CORPORATION COMMISSION	WELL PLUGGI K.A.R8	API NUM	API NUMBER 15-095-20,409 0000				
200 Colcrado Derby Building Wichita, Kansas 67202		LEASE N	AME/	antha	Young		
· ·	TYPE OR	WELL NU	MBER	1			
	NOTICE: Fill ou and return t office withi	3300 ¥	3300 Ft. from S Section Line				
		3300	3300 Ft. from E Section Line				
LEASE OPERATOR Messenger Petroleum, Inc				SEC. 23 TWP. 295 RGE. 8 (E) or W			
ADDRESS Rt. 1 Box 172-Al Kingman KS 67068				COUNTY Kingman			
PHONE#(3/6) 532-5400 OPERATORS LICENSE NO. 4706				Date Well Completed <u>Aug. 1976</u>			
Character of Well <u>945</u>				Plugging Commenced <u>4-6-94</u>			
(OII, Gas, D&A, SWD, Input, Water Supply Well)				Plugging Completed 4-6-94			
The plugging proposal was appro	oved on03	- 31- 94	permit # 1.	5-095-	20409	<u>ル</u> (date)	
by KCC Dist: #2 Dev	id P. Williams	··	(KC	C Distrl	ct Ager	nt's Name).	
Is ACO-1 filed? <u>yes</u> If	not, is well to	g attached?	it was	attached	to CP	-/	
Producing Formation Missis							
Show depth and thickness of all	•					-	
OIL, GAS OR WATER RECORDS	1		CASING RECO	RD			
	· · · · · · · · · · · · · · · · · · ·						
Formation Content Mississippian Chart gas oil 4 Salt 4206 - 421	water 4206	o Size	_]	Pulled	оит 		
4206- 421	Surface 2 Surface 4		W/2505X W/2005X	2620'			
		5/3 5/2					
Describe in detail the manner is placed and the method or method were used, state the charact Sand in to 4/48 pour 5 sx Spot 35 sx (60/40 poz w/4 (60/40 poz w/4 ogel) top	ds used in intr er of same and	oducing it depth pla	into the ho	le. If c	ement o	or other plugs et each set.	
(60/40 poz w/440 gel) top	off w/ 15 sx (6)	3 , circ +	(7000)) . a	tropped 3	<u>ace w/</u> 32 fill	to surface	
with common (If additional descr							
	·				Na 27	2114	
Name of Plugging Contractor <u>s</u> Address <i>611 N. Blaine At</i> -	1 45 17	4.04			STATE CO	PROPERTYED	
Address on M. Diaine At	1100, 10 67	Massa	Pat . la.		AF	RECEIVED REGRATION COMMISSION	
//	LUGGING FEES: _	v.	<u>ier letroleu</u>	m, inc		4-20 0	
NAME OF PARTY RESPONSIBLE FOR P STATE OF Kansas The F. Massanaa	COUNTY OF	Kingman		_,ss.	CONSERV Wich	ATION DIVIBION	
Jon F. Messenger above-described well, being fir	st duly sworn o	n oath, sav	(Employee o	f Operat ave know	or) or" ledne c	ີ່ເປັນຂຶ້ນສູລໄດ້ຕົ້) of of the facts.	
statements, and matters herei	n contained and	the log of	the above-	describe	d well	as filed that	
the same are true and correct,	so help me God.	(Signatur	e)	5 W Cs	senge		
·		(Address)	R+.1	Box 172-A	11 King	man, KS 67068	
SUBSCRIBED AND	SWORN TO befor						
	SWORN TO befor		suge Be	uma	nhou	ust	
: My Commission		notary i	an abai 100th@ft	ary Publ	Ic		
rry Commission		STATE OF	KANSAS			Form CP-4	
	My	Appt. Exp	3-20-98		F	Revised 05-88	