

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

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

API NUMBER 15-094-20-956  
*095-936*

LEASE NAME Hartmen-3

WELL NUMBER 3

SPOT LOCATION 1980-FNL660-FWL

SEC. 16 TWP. 30 RGE. 8 (X) or (W)

COUNTY Kingman

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

Plugging Commenced \_\_\_\_\_

Plugging Completed 3/7/84

*Rec'd  
3-19-84*

TYPE OR PRINT

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

LEASE OPERATOR Monsanto Oil Co

ADDRESS 3545 NW 58th, Okla. City, OK 73112

PHONE # ( ) \_\_\_\_\_ OPERATORS LICENSE NO. 5457

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

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

Which KCC/KDHE Joint Office did you notify? Wichita, Kansas

Is ACO-1 filed? yes If not, is well log attached? was sent in

Producing formation Mississippi Depth to top \_\_\_\_\_ bottom \_\_\_\_\_ T.D. 4300

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

OIL, GAS OR WATER RECORDS | CASING RECORD

| Formation | Content | From | To | Size   | Put in | Pulled out |
|-----------|---------|------|----|--------|--------|------------|
|           |         |      |    | 8 5/8  | 286    | none       |
|           |         |      |    | 16 1/2 | 4299   | 2823       |
|           |         |      |    |        |        |            |
|           |         |      |    |        |        |            |

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. plug back at 4258  
Hallaburton pump in 50 sacks cement stop plug 3700 ripped at 3400 3250/3050 - 2823  
Hallaburton pump top plug 3 sacks hulls 6 sacs jell 110 sacks cement  
60-40 POZ 2% jell 3%cc

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

Name of Plugging Contractor Clarke Copp License No. 5105  
Address Box 189, Medicine Lodge, KS 67104

STATE OF \_\_\_\_\_ COUNTY OF \_\_\_\_\_, ss.

(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) *Charles P. Morgan*  
(Address) \_\_\_\_\_

SUBSCRIBED AND SWORN TO before me this 14 day of March, 1984

*Danella Ricke*  
Notary Public

My Commission expires: 10-11-87