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To:

STATE CORPORATION COMMISSION

Wichita State Office Bldg. - PLUGGING SECTION

130 S. Market, Room 2078

Wichita, Kansas 67202

TECHNICIAN'S PLUGGING REPORT

Operator License # 101

Operator: STATE OF KANSAS

Name & FEE FUND

Address _____

AB oil well XXX Gas Well _____ SWD Well/ Input Well _____ D & A _____

Other well as hereinafter indicated: _____

Plugging Contractor: K-W WELL SERVICE Lic. # 3097

Address: 19450 FORD ROAD, CHANUTE, KS. 66720

Company to plug at: Hour: _____ Day: _____ 5 Month: _____ 5 2000

Plugging proposal received from: JIM KEPLEY

Company Name: K-W WELL SERVICE Phone: 316-431-2285

Were: _____

Plugging Proposal Received by: TONY WILLIAMS

TECHNICIAN
None

Plugging attended by Agent: All XXX Part _____

Operations Completed: Hour: _____ Day: _____ 5 Month: _____ 5 2000

Actual Plugging Report: WELL WAS CLEANED OUT TO 625' AND 1" PIPE WAS RAN TO THAT DEPTH. THE WELL WAS CEMENTED BOTTOM TO TOP USING 250 SACKS OF PORTLAND CEMENT.

RECEIVED
STATE CORPORATION COMMISSION

JUN 14 2000

CONSERVATION DIVISION
Wichita, Kansas

Remarks: CONTROL NUMBER: 20000050-001

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

I DID observe this plugging.

Signed:

Tony O. Williams
TECHNICIAN

