

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

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

15-047-10024-0000

API NUMBER 04-29-62

LEASE NAME Meyer A

WELL NUMBER 1

330 Ft. from S Section Line

3630 Ft. from E Section Line

SEC. 34 TWP. 24 RGE. 16W (E) or (W)

COUNTY Edwards

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

Plugging Commenced 03-13-97

Plugging Completed 03-19-97

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

LEASE OPERATOR Oil Producers, Inc. of Kansas

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

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

Character of Well Oil

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

The plugging proposal was approved on 03-19-97 (date)

by Steve Pfeifer (KCC District Agent's Name)

Is ACO-1 filed? Yes if not, is well log attached? \_\_\_\_\_

Producing Formation \_\_\_\_\_ Depth to Top 3834 Bottom 4266 T.O. 4558

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

4-4-97

OIL, GAS OR WATER RECORDS

CASING RECORD

Formation	Content	From	To	Size	Put In	Pulled out
	Surface	0	438	8 5/8"	438	0
	Production	0	4358	4 1/2"	4358	1890'

RECEIVED  
KANSAS CORP COM  
1997 APR 11 AM 3:38

Describe in detail the manner in which the well was plugged, indicating where the fluid was placed and the method or methods used in introducing it into the hole. If cement or other plug were used, state the character of same and depth placed; from \_\_\_\_\_ feet to \_\_\_\_\_ feet. Bottom plug sand off to 3784', 4 sks cement, Mixed 300# hulls 10 gel and 50 sks cement 60/40 poz 100 gell, 100# hulls, plug, 150 sks cement. Max pressure 300#, shut in pressure 50#. Plugging started 9:30 am completed 11:00 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.

Joseph J. 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 the the same are true and correct, so help me God.

(Signature) Joseph J. Strube

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

SUBSCRIBED AND SWORN TO before me this 2nd day of April, 1997

Bonnie L. Connell  
Notary Public

USE ONLY ONE SIDE OF EACH FORM  
My Commission Expires: April 8, 1997

