## KANSAS STATE CORPORATION COMMISSION

WELL PLUGGING SUPERVISOR'S REPORT TO: Jewel M. Ogden, Director 500 Insurance Building 212 North Market Wichita 2, Kansas 15-155-02199-00€ File No. \_\_Location: County: / \_Twp.<u>I3</u> Rge. Name of Field or Pool: Total Depth: 375I have this date completed supervision of plugging of: Well No. Lease Operator's Full Name Complete Address: Plugging Contractor: License No. Abandoned Oil Well Gas Well Input Well SWD Well D & A If well is a rotary drilled dry hole did operators wait for you to arrive\_\_\_\_ If yes how long \_Reason: Operation Completed: Hour 10:30 Day 3/ Month Warch The above well was plugged as follows: 70-291-C.W.C-5/1-3752-200 avc. Circulate with fellmed 1800 I hereby certify that the above well was plugged as herein stated and that I was present while the above well was being plugged. Signed: Well Plugging Supervisor I hereby state that I was not present while the above well was being plugged, however, to the best of my knowledge and belief it was plugged as herein stated. A full account for my not being present is as follows: Signed: Reviewed: 6 4053 Well Plugging Supervisor MRSupervisor MOISING + DIVISION Remarks: PLUGGING acan, msas

4-8-58

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