400 13 STATE OF KANSAS STATE CORPORATION COMMISSION Ħ

WELL PLUGGING RECORD

K.A.R.-82-3-117

API NUMBER 15-185-22128-0000

200 Colorado Derby Building Wichita, Kansas 67202 TYPE OR PRINT NOTICE: Fill out completely and return to Cons. Div. office within 30 days.					LEASE N	LEASE NAME Alpers WELL NUMBER A#1	
					WELL NI		
						Ft. from S Section Line	
						Ft. from E Section Line	
LEASE OPERATOR GLOBE EXPLORATION, INC.						TWP. <u>22</u> RGE. <u>_13W</u> (E)or(W)	
Box 12 ADDRESS Great Bend, KS 67530						Stafford	
316. 703-5404							
Character of Well					? Pluaain	g Commenced ¹ 0/7/88	
Character of WeilOPERATORS LICENSE NO. Character of Weil					Pluggin		
The plugging prop	osal was annroyed	on 3000	Hipopy, 1	0 680		(data)	
L.	0341 Wd0 dpp. 0104	Sin	UC.	NING.	10h	g Completed1 <u>0/11/88</u> (date) CC District Agent's Name). omT.D.	
БУ				CONFIDNA.	<u> </u>	C DISTRICE AGENT'S Name).	
Is ACO-1 filed?	If not,	is well	log a	4. M.C. 128. q 5.			
Producing Formati	on	Depth	† 1 0 T	ор	Bott	omT.D.	
Show depth and th	ickness of all wat	er, oil a	and ga	s formati	ons.		
OIL, GAS OR WATER RECORDS CAS					ASING RECO	RD	
Formation	Content	From	То	Size	Put in	Pulled out	
		_	-	8 5/8	292	none	
		_	-}	5 1/2	3889	2466	
•		_	-				
placed and the m were used, state Plugged bot 2466. Plug 100# hulls,	ethod or methods us the character of tomwwith sand ged surface with 8 5/8 plug, 10	sed in In f same a to 3500' th 400#	rodu nd de , ra hull cem	cing it in pth plac n 5 sacks, 10 ge ent 60/4	nto the ho ed, from_ s cement 1, 50 sa 0/pos 6%	<u> </u>	
(If ad	ditional descripti	on is nec	essar	y, use <u>BA</u>	<u>CK</u> of this	form.)	
Name of Plugging Contractor KELSO CASING PULLING, INC. License No. 6050							
Address P.O.	Box 347 Cha	ase, KS	675	24			
NAME OF PARTY RES	PONSIBLE FOR PLUGG	ING FEES:	GLO	BE EXPLO	RATION		
STATE OF Kans	as0	OUNTY OF	R	ice	·	_,ss.	
R. Darre	ell Kelso			(1	Emplovee o	f Operator) or (Operator) of	
statements, and		ntained a	ind thi	ath, says:	That I hthe above-	ave knowledge of the facts, described well as filed that	
			()	Address)	P.O. Box	347 Chase, KS 67524	
;	SUBSCRIBED AND SWO	RN TO bef			th day	of October ,1988	
					(ine)	Hoover	
\$- 	My Commission Expl	res:)	Not	ary Public	

INSING HOOVER State of Kancas My Appt, Exp. Aug. 15, 1989

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Form CP-4 Revised 05-88