STATE CORPORATION COMMISSION	WELL PLUGG K.A.R		RECORD -117	API NUMB	API NUMBER 15.185-12974-0000			
200 Colorada Derby Bullding Wichita, Kansas 67202				LEASE NA	LEASE NAME <u>Smallwood Unit</u>			
	TYPE OR PRINT NOTICE: Fill out completely and return to Cons. Div. office within 30 days.			WELL NUM	WELL NUMBER #3			
				1650_	1650 Ft. from S Section Line			
				3630_	3630 Ft. from E Section Line			
LEASE OPERATOR Rockhold Engineering, Inc.				sec. <u>2</u>	SEC. $\frac{2}{1}$ TWP. $\frac{22}{2}$ RGE. $\frac{14}{1}$ (E) or (W)			
ADDRESS Box 698, Great Bend, Ks. 67530				COUNTY _	COUNTY Stafford			
PHONE # 616+793-5290 OPERATORS LICENSE NO.5111				Date Wel	Date Well Completed $10-24-51$			
Character of Well <u>Oil</u>				Plugging	Plugging Commenced 9-7-89			
(Oll, Gas, D&A, SWD, Input, Water Supply Well)				Plugging	Plugging Completed 9-26-89			
The plugging proposal was appe	oved on	Sept	ember 25	5, 1989		(date)		
by Duane Rankin			·	(KC	C District Age	nt's Name).		
Is ACO-1 fllod?1	f not, is well	log a	ttached?	With ap	plication	•		
Producing Formation Depth to Top						3783 <u>'</u>		
Show depth and thickness of a	il water, oil a	nd ga	s formati	ons.				
OIL, GAS OR WATER RECORDS				ASING RECO	RD			
Formation Content	From	To	Sizo	Put In	Pulled out			
]	8-5/8"	340	None			
	<u>·</u>	·	5-1/2''	3782'	2041.50			
Describe in detail the manner placed and the method or met wore used, state the characteristics and to 3440 and casing. B.J. Titan plugge sacks gel, 100# hulls, re 6% gel. Maximum pressure	hods used in instance of same a 5 sacks cemend with 4 leased plug	nd d nt. 3 400# and j	epth plac Shot cas hulls, pumped l	nto the ho ing at 30 10 sacks 00 sacks	le. If coment 900 Pul led gel, 50 sac	or other plugs of pach set 5 6/ joints of 5 ks cement, 10		
Name of Plugging Contractor	Rockhold Eng	inee	ring, In	c.	License No.	5111 .		
Address Box 698, Great Bend, Ks. 67530						3111 8120		
NAME OF PARTY RESPONSIBLE FOR			ckhold E	ngineeri	ng Sinc.	10-9-89		
STATE OFKansas	COUNTY OF				iss. OUTU	9 1989		
James W. Rockhold			(Employee c	of Operator) o	i r (Operator) n‡		
above-described well, being f statements, and matters her the same are true and correct	ein contained a	and ti	oath, says ne log of (Signature	the above-	ave knowledge	of the fartham as filed that		
SUBSCRIBED A	ND SWORN TO be 1		no this <u>6</u>	the day	or October	1989 Herrian		
My Commissio	n Expires:	Ba	NA M. LEATHER rton County, Ka pt. Exp. 9-2	MAN Not	ary Public	me me		

Form CP-4 Rovised O5-88