STATE OF KANSAS
STATE CORPORATION COMMISSION
Give All Information Completely
Make Required Affidavit
Mail or Deliver Report to:
Conservation Division
State Corporation Commission

## WELL PLUGGING RECORD

| State Corporation Commission 212 No. Market  | _ St                            | afford  | Count          | v. Sec. 28 .                      | rwn 23 Boo                       | (E) $(E)$  |  |
|--|---------------------------------|---|----------------|-----------------------------------|----------------------------------|--|--|
| Wichita, Kansas<br>NORTH   | Location as "NE                 | E/CNW#SW#" o  | r footage fro  | m lines NE                        |                                  |  |  |
|  | Lease Owner_                    |   | L. Austi       | _n                                |                                  |  |  |
|  | Lease Name                      | Meyer   | 7.20           | GL 00 1                           |                                  | Well No  |  |
|  | Office Address_                 |   |                | Stafford,                         | Kansas                           | <del></del>                                      |  |
|  |                                 | Character of Well (completed as Oil, Gas or Dry Hole)                     |                |                                   |                                  |  |  |
| 1  |                                 | Date well completed 1/14/42 19 Application for plugging filed Yes 19      |                |                                   |                                  |  |  |
|  | •                               | Application for plugging filed Yes  Application for plugging approved Yes |                |                                   |                                  |  |  |
|  | Plugging comme                  |   | 11/19/70       | )                                 |                                  | 19   |  |
|  | Plugging comple                 |   | 11/25/70       |                                   |                                  |  |  |
|  | Reason for aban                 |   | or producin    | g formation Ut                    | neconomica                       |  |  |
|  |                                 |   |                |                                   |                                  |  |  |
|  | If a producing                  | well is abandone  | ed, date of la | ast production_                   | _11 <b>/1/</b> 62_               | 19   |  |
| Locate well correctly on above   |                                 | 37  | the Conserv    | ration Division                   | or its agents be                 | fore plugging was com-                           |  |
| Section Plat   | menced?                         |   | all Dabe       | and a in                          |                                  |  |  |
| Name of Conservation Agent who supe<br>Producing formation Arbuckle  | rvised plugging of this         | s well Russ   | 5 P-11-        | , 3838                            | m · 1 D · il                     | f Well 3838 Feet                                 |  |
| Show depth and thickness of all water,   |                                 |   | Bottor         | <u> </u>                          | Total Depth o                    | f Well_2020 Feet                                 |  |
| Show deput and unckness of an water,   | on and gas formation            | <b>5.</b>   |                |                                   |                                  |  |  |
| OIL, CAS OR WATER RECORD   | S                               |   | -              |                                   |                                  | CASING RECORD                                    |  |
| FORMATION  | CONTENT                         | FROM  | 70             | SIZE                              | PUT IN                           | PULLED OUT                                       |  |
|  |                                 |   |                |                                   |                                  |  |  |
|  |                                 | STATE   | ECEIV          | -                                 |                                  |  |  |
|  |                                 | -1112 60,   | PORATION .     | E D<br>OMMISSION                  | <u> </u>                         | <u> </u>   |  |
|  |                                 |   | 11.24. 4       | d —                               |                                  | <del>                                     </del> |  |
|  |                                 | CONSE   | VATION E       | 1/0                               | · <del> </del>                   | <del></del>                                      |  |
|  |                                 |   | hita, Kans     | IVISION                           |                                  | <del></del>                                      |  |
|  |                                 |   | rinia, Kana    | AS                                |                                  | <del></del>                                      |  |
| Pulling pipe & pluggi<br>Plugging. Run 4½ yar  | ds of ready mi                  | x cement f  | rom 250        | to base                           | of cellar.                       |  |  |
|  |                                 |   |                |                                   |                                  |  |  |
| <u>., </u>   | <del> </del>                    |   |                |                                   |                                  |  |  |
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| 100 mm 10           |                                 |   | 1              | <del>_</del>                      |                                  | <del></del>                                      |  |
| The second secon           |                                 |   |                |                                   |                                  | <u> </u>   |  |
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| <del>The state of the </del> |                                 |   |                |                                   |                                  |  |  |
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| The state of the s           |                                 | <u> </u>  |                |                                   | <del></del>                      |  |  |
| **************************************   |                                 | <del></del> -   | _              |                                   |                                  |  |  |
|  | · <del></del> -                 |   |                |                                   | - <del>-</del>                   | <del></del>                                      |  |
| Name of Plugging Contractor  | (If additional<br>Glenn & Smith | description is neces<br>Pipe Pull   | sary, use BACK | of this sheet)<br>Box 156,        | Ellinwood,                       | , Kansas   |  |
| Address  |                                 |   |                |                                   |                                  |  |  |
|  | <del></del>                     |   |                |                                   |                                  |  |  |
| STATE OF Kansas  |                                 | St.   | fford          |                                   |                                  |  |  |
| STATE OF Robert L. A   | ustin                           | NTY OF Sta  |                |                                   | _, SS.                           | A F.V 4  |  |
| well, being first daly sworn on oath, s  | ays: That I have kno            | owledge of the  | acts, statem   | owner) or (own<br>ents, and matte | ner or operator) rs herein conta | of the above-described ined and the log of the   |  |
| abave described well as filed and that   | the same are true and           | u correct. So h   | eip me God,    | 1.F                               |                                  |  |  |
| HOTATA   | i                               | (Signature)   | A              | 17110                             | T [/_1                           | CINCOL   |  |
| · · · · · · · · · · · · · · · · · ·  |                                 | ]   | O. Bo          | x 159, Sta                        |                                  | ısas 67578                                       |  |
| 飘 Fublic 差   | . ~                             |   |                |                                   | Address)                         |  |  |
| Subscribed and Suronn to befor   | e me this/                      | day of_   | <u>Degemb</u>  | er 🧷                              |                                  | <u> </u>   |  |
| WAND COUNTY  |                                 |   | Vier           | 20) Z.                            | Dlute                            | zec )  |  |
| My commission expires 1/28/73  |                                 |   | Irene          | L. Benton                         |                                  | Notary Public.                                   |  |