STATE OF KANSAS WELL PLUGGING RECORD STATE CORPORATION COMMISSION K.A.R.-82-3-117

API NUMBER 15-185-22,330-0000

| 209 Colorado Derby Bullding Wichite, Kansas 67202 | | | | | LEASE NAME Teichmann | | |
|--|--|--|---|---|---|--|--|
| | | TYPE O | R PRINT | WELL N | WELL NUMBER 1. Ft. from S Section Line | | |
| | | NOTICE: FILL | | <u>.</u> | | | |
| | , | | hin 30 days. | | Ft. from E Section Line | | |
| LEACE ODER | ATOR I. D. Drill | ing Inc | | | | | |
| ADDRESS RR #1 Box 183-B Great Bend, Ks. 67530 | | | | | TWP. 22 RGE. 12W (Exor(W) | | |
| | | | | | Stafford | | |
| PHONE#(316) 793-3051 OPERATORS LICENSE NO. 6039 | | | | | Date Well Completed | | |
| Character of Well <u>Oil</u> | | | | | Plugging Commenced 8-1-91 | | |
| (Oif, Gas, D&A, SWD, Input, Water Supply Well) | | | | | g Completed 8-5-91 | | |
| The plugg! | ng proposal was ap | proved on | | | (date) | | |
| by | · · · · · · · · · · · · · · · · · · · | | | (KC | CC District Agent's Name). | | |
| Is ACO-1 f | 11ed? | If not, is well i | og attached?_ | | | | |
| Producing | Formation | Depth | то Тор | Bott | om T.D. 3690' | | |
| Show depth | and thickness of | all water, oll an | d gas formati | ons. | | | |
| OIL, GAS | OR WATER RECORDS | | c | ASING RECO | RD | | |
| Formation | Content | From | To Size | Put In | Pulled out | | |
| | | | 8 5/8" | 304' | none | | |
| | | | | <u> 3685' </u> | 2.730! | | |
| placed and | d the method or me , state the chara Sanded b Plugged | thods used in int cter of same an ottom to 3480' with 300# hull | roducing it ind depth place ran 5 sack | nto the ho ed, from as cement 50 ce,em | Ing where the mud fluid wile. If cement or other pluifeet to feet each seconds. Shot pipe @2903'. t. 10 gel, 125 sacks | | |
| Name of Plu | | | | _ _ | License No. 6050 | | |
| | P.O. Box 347 C | | | | | | |
| | RTY RESPONSIBLE FO | | | Drilling | Tng | | |
| | Kansas | COUNTY OF _ | · | - | _,ss. | | |
| | R. Darrel | l Kelso | (E | Employee of | f Operator) or (Operator) | | |
| statements | | ein contained and | d the log of t | he above- | ave knowledge of the fact described well as filled th | | |
| 5 M. | 15510N | 1 | (Signature) | T/AA | - Men | | |
| . AUG O | 7 1991 SUBSCRIBED | ND SWORN TO befo | (Address) | 6 day 9 | x 347 Chase, KS. 67524 of August ,19 91 | | |
| GURSETHAN) | iow Edvisida Kansas | | | ma | Llessberg | | |
| | My Commission | n Expires: | State of Kansa My Appt. Exp. Aug. 24 | Note 15 1003 | iry Pub/Ic | | |