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9-27

To: STATE CORPORATION COMMISSION
CONSERVATION DIVISION - PLUGGING SECTION
200 COLORADO DERBY BUILDING
WICHITA, KANSAS 67202

API NUMBER 15-185-22,717-0000

SW NE SW, SEC. 9, T 22 S, R 11 W/EX

1650 feet from S section line

3630 feet from E section line

TECHNICIAN'S PLUGGING REPORT

Operator License # 6039

Lease Name Eriksen Well # 4

Operator: L.D. Drilling, Inc.

County Stafford 117.39

Name & Address RR 1, Box 183 B

Well Total Depth 3612 feet

Great Bend, KS 67530

Conductor Pipe: Size _____ feet

Surface Casing: Size 8 5/8 feet 287

Abandoned Oil Well _____ Gas Well _____ Input Well _____ SWD Well _____ D&A X

Other well as hereinafter indicated _____

Plugging Contractor L.D. Drilling, Inc. License Number 6039

Address RR1, Box 183 B, Great Bend, KS 67530

Company to plug at: Hour: 8:45 p.m. Day: 27 Month: 9 Year: 19 90

Plugging proposal received from Greg Davidson

(company name) L.D. Drilling, Inc. (phone) 316-793-3051

Elevation 1791'

were: to fill hole with heavy mud and spot cement through drill pipe Anhydrite 450-530'

1st plug at 550' with 50 sx cement,

2nd plug at 320' with 50 sx cement,

3rd plug at 40' with 10 sx cement,

4th plug to circulate rathole with 15 sx cement.

Plugging Proposal Received by Case Morris (TECHNICIAN)

Plugging Operations attended by Agent?: All _____ Part _____ None X

Operations Completed: Hour: 10 p.m. Day: 27 Month: 9 Year: 19 90

ACTUAL PLUGGING REPORT 1st plug at 550' with 50 sx cement,

2nd plug at 320' with 50 sx cement,

3rd plug at 40' with 10 sx cement,

4th plug to circulate rathole with 15 sx cement.

RECEIVED STATE CORPORATION COMMISSION

10-1-90

OCT 1 1990

CONSERVATION DIVISION Wichita, Kansas

Remarks: Used 60/40 Pozmix 6% gel by Allied.

(If additional description is necessary, use BACK of this form.)

INVOICED

OCT 05 1990

DATE

INV. NO.

29544

Signed Case Morris (TECHNICIAN)

EFFECTIVE DATE: 9-14-90

FORM MUST BE TYPED
FORM C-1 4/90

State of Kansas 15-185-22,717-0000

FORM MUST BE SIGNED
ALL BLANKS MUST BE FILLED

NOTICE OF INTENTION TO DRILL

Must be approved by the K. C. five (5) days prior to commencing well

Expected Spud Date September 20 1990
month day year

SW NE SW Sec 9 Twp 22 S, Rg 11 East
West

OPERATOR: License # 6039
Name: L. D. Drilling, Inc.
Address: R.R. 1 Box 183 B
City/State/Zip: Great Bend, Kansas 67530
Contact Person: L. D. Davis
Phone: (316) 793-3051

1650 feet from South line of Section
3630 feet from East line of Section
(Note: Locate well on Section Plat on Reverse Side)

CONTRACTOR: License #: 6039
Name: L. D. Drilling, Inc.

County: Stafford
Lease Name: Eriksen Well #: 4
Field Name: Shepherd North
Is this a Prorated Field? yes no
Target Formation(s): Arbuckle
Nearest lease or unit boundary: 990'
Ground Surface Elevation: 1790 est feet MSL

Well Drilled For: Well Class: Type Equipment:
 Oil ... Inj Infield Mud Rotary
... Gas ... Storage ... Pool Ext. ... Air Rotary
... OAWO ... Disposal ... Wildcat ... Cable
... Seismic; ... # of Holes

Domestic well within 330 feet: yes no
Municipal well within one mile: yes no
Depth to bottom of fresh water: 100'
Depth to bottom of usable water: 200'
Surface Pipe by Alternate: X 1 ... 2
Length of Surface Pipe Planned to be set: 220'
Length of Conductor pipe required: NONE
Projected Total Depth: 3625'
Formation at Total Depth: Arbuckle
Water Source for Drilling Operations:
 well ... farm pond ... other

If OAWO: old well information as follows:
Operator: _____
Well Name: _____
Comp. Date: _____ Old Total Depth _____

DWR Permit #: applied for
Will Cores Be Taken? yes no
If yes, proposed zone: _____

Directional, Deviated or Horizontal wellbore? yes no
If yes, total depth location: _____

220' Alt. I Req.

Exp. 3/14/91

AFFIDAVIT

Pusher Kerry Davidson INIT. P. R.

SPUD DATE 9-22-90

LENGTH SURFACE PLANNED 280

RESERVE PIT STATUS- REMOVE FLUID LINED
after salt sect. bbbls. when done bbbls.

RATHOLED AHEAD? Y N SIZE HOLE _____
SURFACE PIPE 8 1/2" @ 287' CONDUCTOR _____
ANHYDRITE T- 450 B- 530 ELEVATION 1711

TD 3612 FORMATION Conq. Carbinate

RAN PIPE @ _____ DV TOOL _____ ALT II DONE _____
_____ SX _____ Y _____ N _____

Arbuckle Plug @ _____ if needed Ft. W/ 40 SX

Hug./Council @ _____ Ft. W/ _____ SX

Anhydrite Base @ 550 Ft. W/ 50 SX

1/2 Base Anyh. @ _____ Ft. W/ _____ SX

1/2, 1/2 Plug @ _____ Ft. W/ _____ SX

Bottom Surface @ 320' Ft. W/ 50 SX

40' Plug @ _____ Ft. W/ _____ SX

RAT HOLE 15 SX MOUSE HOLE W/ _____ SX

WATER WELL _____ SX (Irr, Well _____ Pond _____)
_____ Hauling _____

TECHNICIAN CM DATE 9-27-90

TYPE OF CEMENT 60/40 Poz 6%

STARTING TIME 8:45 (AM/PM) DATE 9-27-90

COMPLETION TIME 10:00 (AM/PM) DATE 9-27-90

CEMENT COMPANY Allied