

STATE OF KANSAS
STATE CORPORATION COMMISSION
200 Colorado Derby Building
Wichita, Kansas 67202

WELL PLUGGING RECORD
K.A.R.-82-3-117

API NUMBER 15-113-20,534 ^{20524.0000}

LEASE NAME Modelmog

WELL NUMBER 1

TYPE OR PRINT
NOTICE: Fill out completely
and return to Cons. Div.
office within 30 days.

660 Ft. from S Section Line

990 Ft. from E Section Line

SEC. 8 TWP. 21 RGE. 1 (or (W))

COUNTY McPherson

Date Well Completed 5/20/78

Plugging Commenced 11/22/91

Plugging Completed 11/25/91

LEASE OPERATOR Mildred A. Fender

ADDRESS P.O. Box 302 Russell, Ks. 67665

PHONE#(913) 483-2566 OPERATORS LICENSE NO. 3987

Character of Well Gas

(Oil, Gas, D&A, SWD, Input, Water Supply Well)

The plugging proposal was approved on 10/24/91 (date)

by David P. Williams, Doug Lewis (KCC District Agent's Name).

Is ACO-1 filled? YES If not, Is well log attached? _____

Producing Formation Miss. Depth to Top 2961 Bottom 2994 T.D. 3029

Show depth and thickness of all water, oil and gas formations.

OIL, GAS OR WATER RECORDS

CASING RECORD

Formation	Content	From	To	Size	Put In	Pulled out
<u>Miss.</u>	<u>Gas, Water, Oil</u>	<u>2990</u>	<u>3029</u>	<u>4 1/2</u>	<u>3029</u>	<u>2464</u>

RECEIVED
KCC DISTRICT #2
DEC 13 1991
WICHITA, KS

Describe in detail the manner in which the well was plugged, indicating where the mud fluid was placed and the method or methods used in introducing it into the hole. If cement or other plugs were used, state the character of same and depth placed, from feet to feet each set.
Sand from T.D. to 50' above perforations. Capped off with 4 sacks of cement. Shot casing off at 2464'. Pulled casing, bailed fluid out of hole. Top 260'. Built bridge plug. Filled from plug to surface with cement.

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

Name of Plugging Contractor Sunflower Well Service, Inc. License No. 30280

Address 408 N 4th Street Canton, KS 67428

NAME OF PARTY RESPONSIBLE FOR PLUGGING FEES: Mildred A. Fender

STATE OF Ks. COUNTY OF Russell, ss.

Raymond L. Gilbert (Employee of Operator) or (Operator) of above-described well, being first duly sworn on oath, says: That I have knowledge of the facts, statements, and matters herein contained and the log of the above-described well as filed that the same are true and correct, so help me God.

(Signature) Raymond L. Gilbert

(Address) P.O. Box 119 Inman, Ks. 67546

SUBSCRIBED AND SWORN TO before me this 9th day of December, 19 91

Beverly A. Folck
Notary Public

My Commission Expires: 12-13-93

BEVERLY A. FOLCK
Notary Public - State of Kansas
My Appt. Expires 12-13-93

Form CP-4
Revised 05-88