## STATE OF KANSAS STATE CORFORATION COMMISSION

Form CP-4

| Give All Information Completely |
|---------------------------------|
| Make Required Affidavit         |
| Mail or Deliver Report to:      |
| Conservation Division           |
| State Corporation Commission    |
| D. O. Rox 17027                 |

## WELL PLUGGING RECORD

| P. O. Box 17027                             |  | Pherson                             | Coun                   | ty. Sec. 11      | Twp. 215 Rge.              | 1W (\X)(W)             |  |  |
|---|--|-------------------------------------|------------------------|------------------|----------------------------|------------------------|--|--|
| Wichita, Kansas 67217                       |  | E/CNWKSWX"                          |                        |                  | PRUX. C SE                 | NW                     |  |  |
|   | Lease Owner_                                   | V 4                                 | etroleum,              | THC.             |                            | 1                      |  |  |
| 1   |  | 1620 H2 L VERET D1 L LE LE WENT NO. |                        |                  |                            |                        |  |  |
|   | Office Address.                                |                                     |                        |                  | D 11 1                     |                        |  |  |
| 1 1 1                                       | 1  | Vell (completed                     | as Qu, Gas c           | t Did Hote) -    | 1-5                        | 19 73                  |  |  |
| 1 1 1 1                                     | Date well com                                  | r plugging filed                    |                        | <del></del>      | 1-5                        | 19 73                  |  |  |
|   |  | r plugging meu.<br>r plugging appro |                        |                  | 1-5                        | 19 73                  |  |  |
|   |  | nenced                              |                        |                  | 1-5                        | 19 73                  |  |  |
| <b>l</b> i   i                              | Plugging comp                                  |                                     |                        |                  | 1-5                        | 19 73                  |  |  |
| <b>│</b>                                    | •  | indonment of we                     | il or producin         | or formation     | Dry H                      |                        |  |  |
|   |  |                                     |                        |                  |                            |                        |  |  |
|   | If a producing                                 | well is abando                      | ed, date of l          | ast production_  |                            | 19                     |  |  |
|   | I.   |                                     |                        | _                |                            | re plugging was com-   |  |  |
| Locate well correctly on above Section Plat | menced?  | Yes                                 | <del> </del>           |                  |                            |                        |  |  |
| Name of Conservation Agent who su           | pervised plugging of th                        | is well Hu                          | gh Scott               |                  |                            |                        |  |  |
| Producing formation                         | ·····  | Depth to top                        | Botton                 | n                | Total Depth of             | Well 3530 Feet         |  |  |
| Show depth and thickness of all wat         | er, oil and gas formatio                       | ns.                                 |                        |                  |                            |                        |  |  |
| OIL, CAS OR WATER RECO                      | B D &  |                                     |                        |                  | ,                          | TACING DECORD          |  |  |
| OIL, CAS OR WATER RECO                      | миэ<br>  | <del></del>                         | +                      |                  |                            | CASING RECORD          |  |  |
| FORMATION                                   | CONTENT  | FROM                                | то                     | SIZE             | PUT IN                     | PULLED OUT             |  |  |
|   |  |                                     |                        | 8 5/811          | 270'                       |                        |  |  |
|   |  |                                     |                        |                  |                            | ,                      |  |  |
|   |  | <u> </u>                            |                        | <u> </u>         |                            |                        |  |  |
|   |  |                                     | <b></b>                |                  |                            |                        |  |  |
|   |  | ļ                                   | ļ. <u> </u>            | <u> </u>         |                            |                        |  |  |
| · · · · · · · · · · · · · · · · · · ·       |  | <u> </u>                            | _                      | <u> </u>         |                            |                        |  |  |
|   |  | <del></del>                         |                        |                  |                            |                        |  |  |
|   |  |                                     |                        | 1                |                            |                        |  |  |
|   | Mud to 401<br>1/2 sack Hulls<br>Rathole capped | , plug, an<br>with 2 sa             | d 10 sack<br>cks cemer |                  | ATE CORPORATION  JAN 9  19 | C<br>VEN               |  |  |
|   | <del></del>                                    |                                     |                        | ,                |                            | YUMA.                  |  |  |
|   | <del></del>                                    |                                     |                        |                  | SERVATION DIN              | NSION                  |  |  |
|   | <del></del>                                    |                                     |                        | ۰۹٬۷۸            | SERVA 19                   | Z3                     |  |  |
|   | <del></del>                                    |                                     |                        |                  | WICHIA TION THE            | <del></del>            |  |  |
| ·   | · · · · · · · · · · · · · · · · · · ·          |                                     | <del></del>            | <del></del>      | Wichita, Kansas            | <u> </u>               |  |  |
|   | <del></del>                                    |                                     |                        | <del></del>      |                            |                        |  |  |
| ·   | <del></del>                                    | <del></del>                         |                        | <del></del>      | <del></del>                |                        |  |  |
|   |  |                                     |                        | <del></del>      |                            |                        |  |  |
|   | <del></del>                                    |                                     |                        |                  |                            |                        |  |  |
|   | · · · · · · · · · · · · · · · · · · ·          | <del></del>                         | •                      | <del></del>      | <del></del>                |                        |  |  |
|   | <del></del>                                    | <del></del>                         | <del></del>            |                  | <del></del>                |                        |  |  |
| •   | (II addition                                   | al description is nec               | essary, use BAC        | K of this sheet) | <del></del>                |                        |  |  |
| Name of Plugging ContractorW                | hite & Ellis D                                 |                                     | nc.                    |                  |                            |                        |  |  |
| Address Box 448, El Do                      | rado, Kansas                                   | 67042                               |                        |                  | ·                          |                        |  |  |
|   |  |                                     |                        |                  |                            |                        |  |  |
| STATE OFKansas                              | ,  | ******                              | Butler                 |                  |                            |                        |  |  |
| Ernest Sifford                              | , ( O  |                                     |                        |                  | , 68.                      |                        |  |  |
| well being rist anly swom on oath           | That I have b                                  |                                     | (employee of           | owner) or (ow    | ner or operator)           | of the above-described |  |  |
| well as filed and the                       | i, suys: I that I have s                       | newledge of the                     | halo                   | ients, and matt  | ers herein contain         | ed and the log of the  |  |  |
| to By The same of                           | WE fire Strine wie figh h                      | eig conscr so                       | neip vao Goo           |                  |                            |                        |  |  |
| NRY !                                       |  | (Signature)                         | Om                     | 12/20            | para                       |                        |  |  |
| ASTAR SE                                    |  |                                     |                        | \ /              |                            |                        |  |  |
|   | 0  |                                     |                        |                  | (Address)                  |                        |  |  |
| Spricinged And Sworn to be                  | fore me this 8th                               | day of                              | Janu                   | ary              | , 19                       | <u>/3</u>              |  |  |
|   |  |                                     | يرك                    | B. O             |                            |                        |  |  |
| Septem                                      | ber 26, 1976                                   |                                     | L. B. Au               | ier              | <u> </u>                   | Notary Public.         |  |  |
| my commenter expires                        |  |                                     |                        |                  |                            | =                      |  |  |

## DRILLERS LOG

| OPERATOR:   | KANSAS PE               | TROLEUM,  | INC.     |            |  |                 |   |                                       |  |  |
|---|-------------------------|---|----------|------------|--|-----------------|---|---------------------------------------|--|--|
| CONTRACTOR:   | White &                 | Ellis Drilli  | ng, Inc. | , Box 448  | 3, El Dora   | ido, Kansa      | s 67042   |                                       |  |  |
| Lease Name Yost   |                         |   | Well No1 |            |  |                 |   |                                       |  |  |
| Sec   | T                       | 215   | R        | 1W(        | Spo  | Approx          | . C SECNW .   |                                       |  |  |
| County  | McPherson               | Sta   | ate      | Kansa      | <u>4</u> [\$   | Flevatio        | on  |                                       |  |  |
| •   |                         |   | uic      |            |  |                 | VII.  |                                       |  |  |
| Casing Record:  | Surface:                | 8 5/8"  | @_       | 270'       | wiţh_  | 200             | Sxs.  |                                       |  |  |
| Pro   | oduction:               |   | @_       | ·          | with_  |                 | Sxs.  |                                       |  |  |
| Type Well:  | Dry Hole                | <u> </u>  |          | Total      | Depth  | 35301           | КВ  | · · · · · · · · · · · · · · · · · · · |  |  |
| Drilling Commer   | nced;                   | 12-23-72  |          | Drilli     | ng Compl   | eted            | 1-5-73  |                                       |  |  |
| Formation   |                         | From  |          | -          | Го   |                 | Tops  |                                       |  |  |
| Clay & Sand Shale & Lime ( Lime & Shale Shale & Lime ( Lime & Shale Lime Shale & Sand Lime Shale |                         | 0<br>40<br>270<br>975<br>1535<br>2000<br>2135<br>2350<br>2460<br>2565<br>2620<br>2894<br>2962<br>3412<br>3435<br>3435<br>3482<br>3515 |          |            | 40<br>270<br>275<br>1535<br>2000<br>2135<br>2460<br>2565<br>2620<br>2894<br>2962<br>3482<br>3482<br>3485<br>3485<br>3530 | CONSER.         | Lansing Mississippi Hunton Viola Simpson  Transportion  AND  1973  WAND  1974  WAND  1975  WAND  WAND  1975  WAND | 3412<br>3482<br>351.5                 |  |  |
| •   | •                       | ·   | COMPL    | ETION RE   | CORD   |                 |   |                                       |  |  |
| Liner Record:   | Size                    |   | From     | <b>1</b> _ |  | · <del></del> _ | То  |                                       |  |  |
|   | *                       |   |          |            |  |                 |   |                                       |  |  |
| Perforating Reco  | rd:                     |   |          |            |  |                 |   |                                       |  |  |
| Formation   |                         | Perforated Interval   |          |            | Number Shots   |                 |   |                                       |  |  |
| An id — e we did name appear ye.  |                         |   |          |            |  |                 |   |                                       |  |  |
| *   |                         |   |          |            |  |                 |   |                                       |  |  |
| r   |                         | •   |          |            |  |                 |   |                                       |  |  |
| Initial Production  | ):                      |   |          |            |  |                 |   |                                       |  |  |
| Electric Log  | Type and Depths Covered |   |          |            |  |                 |   |                                       |  |  |
|   |                         |   |          |            |  |                 |   |                                       |  |  |