STATE OF KANSAS
STATE CORPORATION COMMISSION
Give All Information Completely
Make Required Affidavit
Mail or Deliving Report to:
Conservation Division
Stave Corporation Commission
212 North Market, Insurance Bldg.

WELL PLUGGING RECORD

| 212 North Market, Insurance Bldg. Wichita, Kansas | | Trego | Coun | ty. Sec. 18 | Twp. 14s Rge | 2 W (E)_ | (W) | | |
|--|---|-----------------------------------|-------------------------------|---|-------------------------|-----------------|--------------|--|--|
| NORTH | Location as "N | NE/CNW#SW#" | or footage fr | om lines NE | ,NE,NW, | | | | |
| : ! ! | Tease Owner John U. Farmer, Inc. | | | | | | | | |
| | Lease Name Zonkger Well No. Well No. Office Address P. O. Box 352, Russell, Kansas | | | | | | | | |
| | | | | | | | | | |
| | Character of Well (completed as Oil, Gas or Dry Hole) Dryhole Date well completed 9/16 | | | | | | | | |
| | | _ | | | _ | 9/16 | 1969 1969 | | |
| | Application for plugging filed 9/16 Application for plugging approved 9/16 | | | | | | | | |
| i i i | Plugging commenced 9/16 | | | | | | | | |
| | Plugging completed 5:00 P.M. 9/16 | | | | | | | | |
| | Reason for abandonment of well or producing formation | | | | | | | | |
| | | | | | | | | | |
| | | well is abandon | | - - | | | _19 | | |
| Locate well correctly on above | was permission | on obtained from Yes | the Conser | vation Division | or its agents be | fore plugging v | was com- | | |
| Section Plat Name of Conservation Agent who supe | menceur avised plugging of th | nis well W | L. Ni | chols, Mo | orland, k | Kansas | | | |
| Producing formation | | Depth to top | Botto | m | Total Depth o | f Well 413 | 0 Feet | | |
| Show depth and thickness of all water, | oil and gas formation | ons. | | - | | | | | |
| - | | | | | | OACINO DE | CORD | | |
| OIL, GAS OR WATER RECORD | '5 | | | | | CASING REC | | | |
| FORMATION | CONTENT | FROM | TO | SIZE | PUT IN | PULLED 1 | TUC | | |
| | | | - | - | | | | | |
| | | - | 1 | - | | - | | | |
| | | | 1 | - | - | | | | |
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| | | · - · · | | ·· — | | | | | |
| | | | | | | 1 | | | |
| | | | | | | | | | |
| Plug # 1 Plug # 2 Plug # 3 Completed W. L. Nic | | c. cement c. cement 9/16/69 | | CONSCRIPTION HONE | COMMISSION SOLVENISSION | y | | | |
| | | | | | | | | | |
| | <u></u> | | | | | | | | |
| None of Director Co. | | al description is nece | | K of this sheet) | | | | | |
| Name of Plugging Contractor | | armer, inc 352. Russo | | nsas 676 | 65 | | | | |
| Address | | | <u> </u> | | | | | | |
| well, being first duly sworn on oath, above-described well as filed and that | ARMER, says: That I have k t the same are true s | and correct. So (Signature) | facts, statem help the Goo | owner) or (ownents, and matter. W. O. : st Wichi | Tarus ta Ave. (Address) | Russell, | og of the | | |
| SUBSCRIBED AND SWORN TO belo | re me this1 | 3thday of | | Septe | | <u>69</u> | / | | |
| ONB FIC SE | | | | Lel | en Ca | rlson | <u>/</u> | | |
| My commission empires EDT Ua | ry 15, 197 | ! | He | len Carl | son | Notary . | Public. | | |
| MA COUNTY A CON | | ROBERTS OF HUTC | HINSON | | | | | | |

. .

OPERATOR John O. Farmer, Inc.

| | | AD | DRESS. | <u>Box</u> | 352 | Russ | <u>e I</u> | <u>K</u> | <u>ansa</u> | 35 | | _ |
|----------------|---|--------------------|----------------|--|-------------|------------------------|--|---------------|-------------------|---------------------|-----------------------|--|
| | 640 Acre N | ., | \neg | MPANY | OPERAT | 10 , sec. | าท | <u>0. F</u> | <u>arm</u> e | <u>er,</u> | <u> ln</u> | C |
| 140 | \perp | 160 | OFF | OFFICE ADDRESS BOX 352, Russell, Ks. | | | | | | | | |
| | | | _ DRI | DRILLING STARTED 9/4, 169, DRILLING FINISHEB / 16/69 | | | | | | | | |
| ┣┿┽ | $\dashv \cap$ | | DAT | E OF F | IRST P | ODUCTION | | | COMP | LETED |) | |
| \mathbb{H}^+ | $+\Upsilon$ | ├ ╾┼╾┼ | | WELL LOCATED NE 1/4 NE 1/4 NW 1/4 North of South | | | | | | | | |
| 160 | | 160 | Line | Line andft. East of West Line of Quarter Section | | | | | | | | |
| | ++ | - | Elev | ration (F | Relative | to sea leve | l) DEI | RRICK FL | 00 R. 2 | 245 | ROUND | <u>,2242</u> |
| Loc | ate well co | rrectly | CH/ | | | ELL (Oil, go | | | Dr | <u>yhc</u> | le | |
| | | | | | | SANDS OR | ZONE | | · <u>·</u> | | | |
| | Nar | ne | | From | om To Name | | | | | | From | To |
| - <u>1</u> | | | | <u> </u> | | . 4 | | | | | } | } - |
| 3 | | | | | - | 3 | | | | | | |
| | Perfo | rating R | ecord If | Any | | | | Sh | ot Recor | 4 | | |
| For | mation | Fron | | , | f Shots | Fo | Formation | | | From To Size | | of Shot |
| | - | | | | | | | | | | | |
| <u>·</u> | | 4_ | <u> </u> | ļ | | · _ | | | | | ļ | |
| | - | | Ш | J | CACINI | G RECORD | | | | | | |
| | | . | Amount | Set | | G RECORD | | Amoun | t Pulled | T P | acker R | tecord |
| Size | Wı. | Thds. | Make | | | | | | | ngth Depth Set Make | | |
| | - | | | | | | | | | <u> </u> | | |
| | | | | | | | | | | | | |
| | | | | | | | <u>. </u> | <u> </u> | <u> </u> | | | <u> </u> |
| Liner Red | cord: Amo | truv | | | | AND MUD | | | | Botton , | | |
| Size | Amount Se | -1 _ | | Chemical M | | Method of Cementing | Amount | | Mudding Method | | Results (See Note) | |
| 5/8/ | 169 | 1 12 | 0 sx | . <u>C</u> | <u>emer</u> | <u>1 t</u> | 1 | | | | ļ | |
| | | <u> </u> | | <u> </u> | | <u> </u> | <u> </u> | <u> </u> | | | <u>}</u> | <u></u> |
| Note: W | hat meth | od was | used to | profect | sands i | Fouter strin | ngs w | ere pull | ed? | - | | |
| NOTE: W | ere botto | m hole p | lugs used | 1? | lf : | so, state kir | ıd, de | pth set o | and resu | lts ob | tained | |
| Potory Tr | nois were | used fro | _m 0 | _ feet t | | LS USED . | nla w | re used | from | | feat to | |
| | | and from | | | | fee | | | | fee | | |
| Type Rig | - | | Rota | | | | | | | | | |
| | | t: wheth | | iNiT | | DUCTION : | | bу ритр | ing | | | |
| | | | | - | | hoke, if an | | | | | | Water |
| Productio | n | bbls. | Gravity | of_all | | _Type of F | 'vmp | if pump | is used | , des | cribe | |

FORMATION RECORD

Give detailed description and thickness of all formation drilled through, contents of sand, whether dry,

| Formation | Тор | Bottom | Formation | Top. | Bottom |
|---|--|----------------------|---|----------------|--|
| Surface Shale Shale sand Sand Redbed Anhydrite Shale shells Shale lime Lime shale Lime Shale lime Shale lime Shale lime sand R.T.D. | 169 600 1020 1300 1625 1665 2490 3600 3905 4038 4130 | 3905 4038 4130 | RECEIVED PROPATION COMMISSION. | Wichita, Mansa | ? |
| - | | | Log Tops | | Tops |
| | | | Heebner Toronto Lansing Marmaton Chert Conglomerate s Arbuckle Log T.D. | and | 3565 3583 3601 3955 4014 4078 4130 |
| ************************************** | in mining | | | | |

1), the undersigned, being first dully warn upon oath, state that this well record is true, correct and complete according to the sectors of this partie and to the best of my knowledge and belief.

| Warn upon oath, state that the knowledge and belief. | Warn upon oath, state that the best of my knowledge and belief. | Warn upon oath, state that the best of my knowledge and belief. | Warn upon oath, state that the best of my knowledge and belief. | Warn upon oath, state that the best of my knowledge and belief. | Warn upon oath, state that the best of my knowledge and belief. | Warn upon oath, state that the best of my knowledge and belief. | Warn upon oath, state that the best of my knowledge and belief. | Warn upon oath, state that the best of my knowledge and belief. | Warn upon oath, state that the best of my knowledge and belief. | Warn upon oath, state that the best of my knowledge and belief. | Warn upon oath, state that the best of my knowledge and belief. | Warn upon oath, state that the best of my knowledge and belief. | Warn upon oath, state that the best of my knowledge and belief. | Warn upon oath, state that the best of my knowledge and belief. | Warn upon oath, state that the best of my knowledge and belief. | Warn upon oath, state that the best of my knowledge and belief. | Warn upon oath, state that the best of my knowledge and belief. | Warn upon oath, state that the best of my knowledge and belief. | Warn upon oath, state that the best of my knowledge and belief. | Warn upon oath, state that the best of my knowledge and belief. | Warn upon oath, state that the best of my knowledge and belief. | Warn upon oath, state that the best of my knowledge and belief. | Warn upon oath, state that the best of my knowledge and belief. | Warn upon oath, state that the best of my knowledge and belief. | Warn upon oath, state that the best of my knowledge and belief. | Warn upon oath, state that the best of my knowledge and belief. | Warn upon oath, state that the best of my knowledge and belief. | Warn upon

Zulen Carlan Helen Carlsofforay Public.