| STATE OF KANSAS STATE CORPORATION COI 200 Colorado Derby Bi | MMISSION | ELL PLUGGING K.A.R82- | | AP: NUMBER 15-009-22,482-00-00 | |
|--|--|--------------------------|------------------------------|--|--------------------|
| Wichita, Kansas 6720 | | | | LEASE NAME Beron | |
| | | TYPE OR PRINT | | WELL NUMBER 1 | • 12 * |
| NOTICE: Fill out <u>completely</u> and return to Cons. Div. office within 30 days. | | | Ft. from S | Section Line | |
| : • | ОГТ | TICO WITHIN | ou days. | Ft. from E | Section Line |
| LEASE OPERATOR Amber Oil, Inc. | | | | sec. <u>34</u> TWP. <u>16S</u> RGE | . 12 XXX or (W) |
| ADDRESS Suite 360, Three Plaza, 3613 NW. 56th St. | | | | COUNTY Barton | |
| Oklahoma City, Ok PHONE# (405) 842-863 | clahoma 73112 | | | Date Well Completed | |
| Character of Well | | | · | Plugging Commenced | 1-30-86 |
| (OII, Gas, D&A, SWD, | Input, Water Sup | oply Well) | | Plugging Completed | 1-30-86 |
| Did you notify the KCC/KDHE Joint District Office prior to plugging this well? yes | | | | | |
| Which KCC/KDHE Joint | Office did you n | not i fy? | District 6 | <u> </u> | |
| is ACO-1 fired? yes | if not, i | s well log | attached? | | |
| Producing Formation | Arbuckle | Depth to | Тор 3350 | Bottom 3370 T.I | 3370 |
| Show depth and thicks | ness of all water | oil and g | as formation | s. · | |
| OIL, GAS OR WATER RE | ECORDS | | CAS | ING RECORD | |
| Formation Co | ontent | From To | Size. 8 5/8 P | ut in Pulled out | - |
| | · | | $-\frac{85/8}{4\frac{1}{2}}$ | $\begin{array}{c c} 300 & 0 \\ \hline 3367 & 61 \end{array}$ | |
| | | | - 1 2 - - | 3307 01 | |
| | | | | | |
| 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. Top plug 5 hulls, 200 sks $60/40$ pox mix 6% gel 3% CC. Bottom plug sanded to 3200 capped with 4 sks cement | | | | | |
| | | | | | |
| (If additi | ional description | is necessa | ry, use <u>BACK</u> | of this form.) | |
| Name of Plugging Cont | tractor <u>Great</u> | Bend Casir | ng Pullers, | Inc. License No. | 4635 CP |
| Address Box 768, G | reat Bend, Kar | nsas 67530 |) | | - |
| STATE OF Kansas | COU | INTY OF | Barton | , ss. | |
| Randy P. Wagner | | | (Emp1 | oyee of Operator) or | (Operator) of |
| | ers herein contai | ned and the | log of the | That I have knowledge above-described well | as filed that |
| | * | | | Randy P Wagne | |
| | en e | | (Address) <u>B</u> | Box 768, Great Ben | d, Kansas 67540 |
| sub s | SCRIBED AND SWORN | I TO before | | day of February | , 19 86 |
| | | | Soe | Notary Public | |
| May of | Commission Evoles | 1-13 | - 90 | Notary Public | |

My Commission Expises 1-13-90

HOTARY PUBLIC - State of Fairbus STATE CORPORATION COMMISSION

My Appl Exp. 1-13-90

My Appl Exp. 1-13-90

FEB

Form CP-4 Revised 08-84 1