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

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

API N	JMBER_	Unknown	_
LEASE	NAME_	WELSH B	

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

ELL NUM	BER _	1			
330	Ft.	from	s	Section	Líne

and return to Cons. Div.
office within 30 days.

(formerly Leaden Oil & Gas and Rooney Siedfried Thom

3630 Ft. from E Section Line

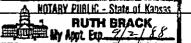
	erly Lesden OII & Gas and RATOR ALLEN DRILLING COMPA		iegtri	.ed, Thom 	as) SEC. <u>18</u>	_TWP21_RGE	. 12 XXEXXX (W)	
ADDRESS	DDRESS P.O. Box 1389, Great Bend, KS 67530					COUNTY Stafford		
PHONE#(3)	.6) <u>793-5877</u> OPERATORS	LICENSE	NO	5418	Date We	il Completed	4/6/56	
Character	of Well TA				Pluggin	g Commenced	6/27/85	
(Oil, Gas, D&A, SWD, Input, Water Supply Well)					Pluggin	g Completed	6/27/85	
Did you n	otify the KCC/KDHE Joint I	District (	Office	prior to	plugging	this well?	yes	
Which KCC	/KDHE Joint Office did yo	u notify?_		odge Cit	у			
Is ACO-1	filed? Not Available f not	, is well	log a	ttached?_	NA			
Producing	Formation <u>NA</u>	Dept	h to T	op <u>NA</u>	Bott	omNAT.	D. NA	
	h and thickness of all wa			_				
·	OR WATER RECORDS		_			DRD	•	
<u> </u>			<u></u>			··-		
Formatio	n Content	From	To	Size	Put in	Pulled out		
		0	281	8"	281	none		
<u> </u>			_	5"	3641	none		
			_					
I	l,l			l	_	- <u> </u>		
placed an	in detail the manner in w d the method or methods u , state the character of	sed in in	troduc	ing it ir	ito the hol	e. If cement	or other plugs	
	oz., 6% Gel: 350 SK down			,			,	
	110 SK down							
	140 SK down	Casing		•				
	(If additional descript	ion is ne	cessar	y, use <u>B</u> /	<u>ACK</u> of this	form.)		
Name of P	 lugging Contractor <u>ALL</u> E	N DRILLIN	IG COMP	ANY	·	License No	5418	
Address	P.O. Box 1389, Great Ben	d, KS 67	530					
STATE OF	KANSAS	COUNTY OF		BARTON		,55.		

(Signature) Doug through

(Address) P.O. Box 1389, Great Bend, KS 67530

Reth Brack
Notary Public

My Commission Expires:\_ CNSERWATHONOUVIERN WYPHYA KRATSAS



Form CP-4 Revised 08-84