

STATE CORPORATION COMMISSION  
200 Colchada Darby Building  
Wichita, Kansas 67202

LEASE NAME Dorothy Reif

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

WELL NUMBER 1

4290 Ft. from S Section Line

1650 Ft. from E Section Line

SEC. 27 TWP. 16S RGE. 12 (E) or (W)

COUNTY Barton

Date Well Completed \_\_\_\_\_

Plugging Commenced 11-21-95

Plugging Completed 11-22-95

LEASE OPERATOR Younger Energy Company

ADDRESS 453 S Webb Road, Suite 100, Wichita, Ks. 67207

PHONE (316) 681-2542 OPERATORS LICENSE NO. 30705

Character of Well oil

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

The plugging proposal was approved on 11-21-95 (date)

by Herb Dienes (KCC District Agent's Name).

Is ACO-1 filed? Yes If not, is well log attached? \_\_\_\_\_

Producing Formation \_\_\_\_\_ Depth to top 3386 Bottom 3390 T.C. 3390

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
	Surface			8 5/8"	267	0
	Production			5 1/2"	3386	0

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 plug were used, state the character of same and depth placed, - from foot to foot each set  
Bottom plug; sanded off to 3330', 5 sks of cement. Allied pumped 60 sks of cement 60/40 10% gel with 200 lbs. of hulls. Displaced it down to 1600'. Circulated to surface from 750' with 75 sks of cement & 200 lbs. of hulls to surface. Pumped 50 sks down backside of 5 1/2" casing with 100 lbs. of hulls. Topped off with 25 sks.

Name of Plugging Contractor D.S. & W. Well Servicing, Inc. License No. 6901

Address P.O. Box 231, Claflin, Kansas 67525

NAME OF PARTY RESPONSIBLE FOR PLUGGING FEES: Younger Energy Company

STATE OF Kansas COUNTY OF Barton, ss.

Joseph F. Strube (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 the the same are true and correct, so help me God.

(Signature) Joseph F. Strube  
(Address) P.O. Box 231, Claflin, Kansas 67525

SUBSCRIBED AND SWORN TO before me this 4<sup>th</sup> day of December, 19 95

Karlynn K. Beck  
Notary Public

My Commission Expires: 9-28-98

USE ONLY ONE SIDE OF EACH FORM

