

API NUMBER 15-185-22,880

LFASE NAME Schulz-Sipes G

WELL NUMBER 1

2310 Ft. from S Section Line

2640 Ft. from E Section Line

SEC. 22 TWP. 21 RGE. 13 (E) or (W)

COUNTY Stafford

Date Well Completed 07-30-92

Plugging Commenced 04-17-95

Plugging Completed 04-19-95

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

LEASE OPERATOR Palomino Petroleum, Inc.

ADDRESS 4924 SE 84th St., Newton, Ks. 67114-8827

PHONE# (316) 283-0232 OPERATORS LICENSE NO. 30742

Character of Well oil

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

The plugging proposal was approved on 04-17-95 (date)

by Steve Middleton (KCC District Agent's Name).

Is ACO-1 filed? yes If not, is well log attached? _____

Producing Formation Arbuckle Depth to Top 3717' Bottom 3720' T.C. 3720'

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	0	372	8 5/8"	372	0
	Production	0	3717	5 1/2"	3714	2700'

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 feet to feet each set
Bottom plug: sanded off to 3650' 5 sks cement. Pulled 2700' of casing out of hole. 4-19-95
Allied mixed 300 lbs. of hulls., 10 sks gel 50 sks cement, 10 sks gel. 100 lbs. of hulls. Re-
leased 8 5/8" wiper plug, pumped 100 sks cement 60-40 poz 6% gel. Max.press-600# shut-in pressure.
200lbs.

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: Palomino Petroleum, Inc.

STATE OF Kansas COUNTY OF Barton, ss.

Joseph F. Strube (Employee of Operator) or (Operator)

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 20 day of April, 19 95

Karlynn K. Beck
 Notary Public

My Commission Expires: 09-28-98.

USE ONLY ONE SIDE OF EACH FORM

