STATE OF KANSAS
STATE CORPORATION COMMISSION
200 Colorado Derby Ratio

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

API NUMBER 15-159-22,103-0000

200 Colorado Derby Building Wichita, Kansas 67202					LEASE NAME Axtell				
	TYPE OR PRINT					WELL NUMBER 2			
NOTICE: Fill out <u>completely</u> and return to Cons. Div.						Ft. from S Section Line			
	office within 30 days.					Ft. from E Section Line			
LEASE OPERATOR Lebsack Oil Production, Inc.					SEC. 13	SEC. 13 TWP.21 RGE.9W XMEX) or (W)			
ADDRESS P.O. Box 489 Hays, Ks. 67601					COUNTY	COUNTY Rice			
HONE#(913) <u>625-3</u>	046 OPERATOR	RS LICENSE NO	o. <u>52</u>	10	Date We	il Complet	ed11-23-85		
Character of Well Gas					Plugging	Plugging Commenced 3-5-92			
(Oll, Gas, D&A, SWD, Input, Water Supply Well)					Plugging Completed 3-9-92				
he plugging prop	osal was approve	ed on					(date)		
У	Phil Worley				(KC	C District	Agent's Name).		
s ACO-1 flled?	1f no	ot, ls well	log a	ttached?_					
roducing Formatio	on	Depth	to T	op	Botto	>m	T.D. 3400'		
how depth and th									
OIL, GAS OR WATER		1	.		ASING RECOF	₹N			
Formation	Content	From	To	Ì	,	Pulled ou	<u> </u>		
	-		<u> </u>	8 5/8" 4 1/2"		none 2625'			
· · · · · · · · · · · · · · · · · · ·				4 1/2	3330	2025			
laced and the meere used, state (If add ame of Plugging of ddress P.O.	the character Sanded bottom Mixed 35 sack circulated central descrip	of same and to 3350' rates and to 3350' rates and to surface at the surface at th	nd de in 4 s sack ace w essar	pth plac acks ceme s @700', /approx 8 y, use BA	ed, from ent. Shot p pulled cas 00 sacks.	feet to ipe @2751 ing to 270 form.)	feet each s ', 2625'. O' and ' 6050		
AME OF PARTY RESE	PONSIBLE FOR PLU	GGING FEES:		Lebsack	Oil Produc	tion, Inc			
TATE OF Kan	sas	COUNTY OF _		Rice		_,ss. <i>MA</i>	IR 1 2 1992		
	R. Darrell Ke	lso		ſ E	Employee of	Operator	BVAORN (Operator)		
bove-described we tatements, and he same are true	matters herein	contained ar	nd the	ith, says:	That I hat the above-d	ive knowl ^y éî	dge (of the fac		
			()	Address)	,,		ase,KS. 67524		
	SUBSCRIBED AND S	WORN TO befo	ore me	this 11	re The	Sug	,199 <u>2</u>		
N	ly Commission Ex	plres:	OTANITAL SERVICE SERVI	IRENE HERZ State of Ka My Appt, Exp. Aug	BEKG nsos	Pub/Ic	Form CP		

Form CP-4 Revised 05-88