

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

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

API NUMBER 15-165-21,587-00-00

LEASE NAME Lamer

TYPE OR PRINT

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

WELL NUMBER 1

4620 Ft. from S Section Line

2970 Ft. from E Section Line

SEC. 23 TWP. 19 RGE. 20 (E) or (W)

COUNTY Rush

LEASE OPERATOR Clyde M. Becker

ADDRESS 212 First National Bldg. Ponca City, OK 74601

PHONE# (405) 765-8788 OPERATORS LICENSE NO. 07344

Character of Well D&A

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

Date Well Completed 09-21-91

Plugging Commenced 09-21-91

Plugging Completed 09-22-91

The plugging proposal was approved on 09-19-91 (date)

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

Is ACO-1 filed? to be filed by operator If not, Is well log attached? no tops

Producing Formation _____ Depth to Top _____ Bottom T.D. 4350'

Show depth and thickness of all water, oil and gas formations.

OIL, GAS OR WATER RECORDS _____ CASING RECORD _____

RECEIVED
STATE CORPORATION COMMISSION
9-20-91
SEP 26 1991

Formation	Content	From	To	Size	Put In	Pulled out

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.

Bottom Plug: @ 1440' w/50 sacks cement thru drill pipe

Next Plug: @ 740' w/80 " " " " " 15 sacks in Rat Hole

Next Plug: @ 330' w/40 " " " " " "

Top Plug: @ 40' w/10 " " " " " "

(If additional description is necessary, use BACK of this form.)

Name of Plugging Contractor Duke Drilling Co., Inc. License No. 5929

Address P.O. Box 823 Great Bend, KS 67530

NAME OF PARTY RESPONSIBLE FOR PLUGGING FEES: Clyde M. Becker

STATE OF Kansas COUNTY OF Barton, ss.

Jay Schneider (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 that the same are true and correct, so help me God.

(Signature) [Signature]
(Address) P.O. Box 823 Great Bend, KS 67530

SUBSCRIBED AND SWORN TO before me this 25th day of September, 19 91

[Signature]
Notary Public

My Commission Expires: _____

