Form CP-4

* STATE OF KANSAS STATE CORPORATION COMMISSION

Give All Information Completely
Make Required Affidavit
Mail or Deliver Report to:
Conservation Division
State Corporation Commission
211 No. Broadway

WELL PLUGGING RECORD

State Corporation Commission 211 No. Broadway Wichita, Kansas	Ri	lce	County	v. Sec. 28	Twp. 20 Rge.	. (E).	7_(w)
NORTH	Location as "N	E/CNW%SW%"	or footage fro	m lines	SE SW NE	?	
! ! !					. ·		
1	Lease Name Engelland Well No. 3 Well No. 4						
	Character of Well (completed as Oil, Gas or Dry Hole)						
		Date well completed.					19
1 i i i	Application for plugging filed						.19
	Application for plugging approved						19
i i	Plugging comm	Plugging commenced			12-16-65		_19
1 ! ! !	Plugging completed				<u> 12-16-65 </u>		19
 -	Reason for aba	ndonment of wel	l or producing	g formation _	Conclor	<u>ierate</u>	
	70 1				16 65		
					10-65 n or its agents before		19
Locate well correctly on above Section Plat		n obtained from				ore plugging	was com
Name of Conservation Agent who supe	rvised plugging of th	is wellC	ilbert To	man			
Producing formation							345 Fee
Show depth and thickness of all water,			·		•		
OIL, GAS OR WATER RECORD	18					CASING DE	COPD
						CASING RE	COKD
FORMATION	CONTENT	FROM	TO	SIZE	РИТ ИН	PULLED	OUT
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						<u> </u>	
Pulled pipe and m	udded hole to	200'. Se	et rock br	ridge and	d finished fi	lling su	rface
with ready-mix ce	ement.						
				$ \int_{\Sigma}$			
				<u>S793</u>	E CONFULATION		
		 	·		-स्तरकार्थ रे	Ne Histor	
		WAR 14 1966					
•				CON	SERVATION		
					Wichita, Kansa	VISION	
	(II additions	description is nece	ssary, use BACK	of this sheet)			
Name of Plugging Contractor	Bert Se					<u>_</u>	
Address	<u>Hutchins</u>	on, Kansa	S				
					· <u>- </u>		
TATE OF Kansas		UNTY OF	Sedgwi		, 58.		
well, being first duly sworn on oath, s bove-described well as filed and that	erator ays: That I have kn the same are true a	nowledge of the	facts, stateme	ents, and mai	wner or operator) tters herein contain	of the above ned and the	describe log of th
		(Signature)	wom	uf_			
	. 13.1			in-617 U	nion Center (Address)		a, Ks.
SUBSCRIBED AND SWORN TO befor	re me this 11th	day of_	March <i>Adel</i>	la m	. 19_	<u>bb</u>	
My commission expires <u>ADELA MIZE</u>	NER, Notary Public-			7	Trace	Notary	Public.
My commission exp	pires November 5, 1	966					