STATE OF KANSAS STATE GON COMMISSION 130 S. Market, Room 2078 Nic'ita, KS 67202

LEASE OPERATOR K N Energy Inc.

ADDRESS PO Box 281304 Lakewood, CO 80228-8304

## K.A.R.-82-3-117

15.009.24594.0000

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

AP1_NUMBER_009-245940	0000
LESSAME ED&J	
WELL NUMBER 8-9	······································
2310 Ft. from S	Section Line
990 Ft. from E	Section Line
sec. <u>8</u> twp. 20 rge.	15 (E)or(W)
COUNTY Barton	
Date Well Completed	7/29/95
Plugging Commenced _	7/30/95
Plugging Completed _	
M	(date)
(KCC District Ag	ent's Name).
BottomT.D	4011
•	
NG RECORD	

PHONE ( 303) 989-	- <u>1740</u> OPERATO	RS LICENSE NO.	5270	Date We	II Completed _	7/29/95	
Character of Well <u>Dry</u> (OII, Gas, D&A, SWD, Input, Water Supply Well)				Pluggin	7/30/95		
						7/31/95	
The plugging pro	oposal was approv	ed on	7/25/95 11:	55 AM		(date)	
Ken Kuhn				(KC	C District Age	nt's Name).	
is ACO-1 filed?	Yes that	ot, is well to	g attached?_	•			
Producing Format	rton <u>Arbuckle</u>	Depth t	тор_3947	Batt	ogT.D.	4011	
Show depth and 1	thickness of all	water, oil and	gas formati	ons.			
OIL, GAS OR WATER RECORDS CAS				ASING RECO	ING RECORD		
Formation	Content	From T	o Size	Put In	Pulled out		
		<del></del> -		<del>-</del>	<u> </u>		
Cemented wit	to the character th 60/40 with 6% G 38/5ft 40 Sks	el Cement pla	ed as follow	ws:			
Name of Plugging	Contractor  Box 1389 Great B  ESPONSIBLE FOR PL	Allen Dri	— lling		Licange CEVED	<sub>MISSION</sub> 5418	
AddressP(	Box 1389 Great B	end Ks 67530	<del>-</del>	Ç	STATE CORPOR	195	
NAME OF PARTY RE	ESPONSIBLE FOR PL	UGG!NG FEES: _	K N Energy	y	Mag 2	UNISIUM.	
STATE OF Colors	Box 1389 Great B ESPONSIBLE FOR PL ado  t N Sencenbaugh En	_ COUNTY OF	Jefferson		_, ss.onomound. Ko	XY2	
Robert	t N Sencenbaugh En	gineer Storage	Operations (	Employee o	f Opérator) or	(Operator) o	
above-described statements, an	well, boing firs d matters horein	t duly sworm o contained and	n oath, says	That In	ave knowledge described well	of the facts as filed tha	
the same are try	e and correct, se	o help me God.	(Signature				
	The second of th		(Address)	PO Box 2	81304 Lakewood	CO 80228	

USE ONLY ONE SIDE OF EACH FORM My Commission expires March 8, 1999

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SUBSCRIBED AND SWORN TO before me this 70

Notary Public