

STATE OF KANSAS
STATE CORPORATION COMMISSION
130 S. Market, Room 2078
Wichita, KS 67202

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

API NUMBER 15-009-01022.0001

LEASE NAME Miller OWWO

WELL NUMBER 1

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

1820 Ft. from S Section Line

7330 Ft. from E Section Line

SEC. 22 TWP. 20 RGE. 15 XE or (W)

COUNTY Barton

LEASE OPERATOR M.A. Yost Operations

ADDRESS Box 811 Russell, Ks. 67665-0811

PHONE#(913) 483-6455 OPERATORS LICENSE NO. 30737

Date Well Completed _____

Character of Well Oil

Plugging Commenced 9/5/97

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

Plugging Completed 9/8/97

The plugging proposal was approved on September 8, 1997 (date)

by Case Morris (KCC District Agent's Name)

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

Producing Formation Arbuckle Depth to Top 3616 Bottom 3620 T.D. 3666

Show depth and thickness of all water, oil and gas formations. 9-26-97

OIL, GAS OR WATER RECORDS | CASING RECORD

Formation	Content	From	To	Size	Put In	Pulled out
				8 5/8"	798'	
				5 1/2"	3663'	1828'

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. Sanded to 3523'. Bailed 5 sks cement. Shot at 12098' & 1828'. Pulled to 1750'. Pumped 125 sks & 1 hull. Pulled to 950'. Pumped 40 sks cement. Pulled to 475'. Pumped 85 sks cement. Pulled to 150'. Circulated with 35 sks cement. Pulled the rest of the pipe. Pumped 10 sks cement. Shut in with 200 PSI.

Name of Plugging Contractor Quality Well Service, Inc. License No. 31925

Address 249 E. Beth Drive Sterling, Ks. 67579

NAME OF PARTY RESPONSIBLE FOR PLUGGING FEES: M.A. Yost Operations

STATE OF Kansas COUNTY OF Russell, ss.

Marcia A. Yost ~~XXXXXXXXXXXXXXXXXXXXXXXXXXXX~~ (Operator) o 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) Marcia A. Yost

(Address) P.O. Box 811, Russell, KS 67665

SUBSCRIBED AND SWORN TO before me this 25th day of Sept., 19 97

Margaret Langhofer
Notary Public

My Commission Expires:
USE ONLY ONE SIDE OF EACH FORM

