WELL	PLUGGING	RECORD
K - A - B	82-3-11	7

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API	ΝĮ	JMBER_	15-159-2	1,856
LEAS	ŝΕ	NAME_	Tobias	

STATE OF KANSAS STATE CORPORATION COMMISSION 200 Colorado Derby Building	WELL PLUGGING RECORD K.A.R82-3-117	API NUMBER 15-159-21,856		
Wichita, Kansas 67202		LEASE NAME Tobias		
	TYPE OR PRINT	WELL NUMBER 1		
	NOTICE: Fill out completely and return to Cons. Div.	SPOT LOCATION NE NW SE		
	office within 30 days.	SEC.16_TWP20.RGE.8(E)or(W)		
LEASE OPERATOR Raymond Oil Co	mpany, Inc.	COUNTYRice		
ADDRESS One Main Place, Sutie 9		Date Well Completed7-11-84		
PHONE # (136) 267-4214 OPE	RATORS LICENSE NO. 5046	Plugging Commenced 7-12-84		
Character of Well <u>D&A</u> (Oll, Gas, D&A, SWD, Input, Wate	r Supply Well)	Plugging Completed 7-12-84		
Did you notify the KCC/KDHE Join	t District Office prior to pi	lugging this well?ves		
Which KCC/KDHE Joint Office did	you notify? Gilbert Toma	n		
is ACO-1 filed? to be filed by operator	ot, is well log attached?			
Producing formation	Depth to top	T.D		
Show depth and thickness of all	water, oil and gas formations	· · · · · · · · · · · · · · · · · · ·		
OIL, GAS OR WATER RECORDS	C/	ASING RECORD		
Formation Conte	ent From To Size Pu	ıt în Pulled out		
Describe in detail the manner in the mud fluid was placed and the the hole. If cement or other pludepth placed, from feet to feet to feet to plug: @ 240' w/50 and the top plug: @ 40' w/1 sack in the feet to plug: @ 40' w/1 sack in the feet to plug: @ 40' w/1 sack in the feet to plug: @ 40' w/1 sack in the feet to plug: @ 40' w/1 sack in the feet to plug: @ 40' w/1 sack in the feet to plug: @ 40' w/1 sack in the feet to plug: @ 40' w/1 sack in the feet to plug in	method or methods used in ings were used state, the characet each set. Sacks coment thru drill pipe hulls & 10 sacks cement	ntroducing it into acter of same and		
	ption is necessary, use BACK			
Name of Plugging Contractor Address P.O. Box 823 Great	Duke Drilling Co., Inc. Bend, KS 67530	STATE CORPORATION COMMISSION		
STATE OF Kansas	COUNTY OF Barton	155 1111 7 0 40-		
		of operator) 6700-		
I eonard Williamson XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX		e true and		
		The state of the s		

(Address) Box 823 Great Bend, KS 67530

SUBSCRIBED AND SWORN TO before me this 16 day of quely

My Commission expires:

Form CP-4 Revised 01-84