STATE OF KANSAS

. WELL PLUGGING RECORD

15-097-21.187-0000

	STATE CORPORATION COMMISSION	K.A.R82-3-117		API NUMBER 13-097-21,187-0000			
	200 Colorado Derby Building Wichita, Kansas 67202			LEASE N	LEASE NAME RALSTIN		
			TYPE OR PRINT		WELL NUMBER 1-13		
	NOTICE: Fill out <u>completely</u> and return to Cons. Div. office within 30 days.				Ft. from S	Section Line	
					Ft. from E	Section Line	
	LEASE OPERATOR Spines Exploration				SEC. 13 TWP. 285 RGE. 20W XXXXX(W)		
	ADDRESS 530 Fourth Financial Center, Wichita, KS 67202				<u>Kiowa</u>		
	PHONE#(316) 264-2808 OPERATORS LICENSE NO. 7105				il Completed	10-12-85_	
	Character of Well <u>D&A</u>				g Commenced _	10-12-85	
	(Oil, Gas, D&A, SWD, Input, Water Supply Well)				g Completed _	10-12-85	
	Did you notify the KCC/KDHE Joint District Office prior to plugging this well? Yes					Yes	
	Which KCC/KDHE Joint Office did you notify? Dodge City						
	Is ACO-1 filed? Yes If not, is well log attached?						
	Producing Formation Depth to Top BottomT.D. 5000'						
	Show depth and thickness of all water, oil and gas formations.						
	OIL, GAS OR WATER RECORDS CAS				RD (CL	
	Formation Content	From T	o Size	Put in	Pulled out		
			8-5/8"	605'			
		-					
	Describe in detail the manner in	which the wel	l was plugged	, indicat	ing 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. 50 sacks @ 1260'						
	50 sacks @ 930' 10 sacks 50 sacks @ 630'						
	10 sacks @ 40'	<u> </u>	Samuel BAC	V -f +bi-	for		
	(If additional descrip			_			
	Name of Plugging Contractor <u>Eagl</u>			<u> </u>	License No	5380	
	AddressP.O. Box 8609, Wichita, KS 67208						
	——————————————————————————————————————	COUNTY OF			_, ^{ss.}		
	Robert L. Eisel, Employee of above-described well, being first statements, and matters herein cothe same are true and correct, so	duly sworn o entained and t	n oath, says: he log of the	That <u>I</u> h	ave knowiedge	e of the facts,	
	RECEIVED (Signature)			Sou	wt d	Essel	
STA	TECTIVED TE CORPORATION COMMISSION		(Address)	P.O. Box	8609, Wichit	a, KS 67208	
	OCT 2 3 1985 SUBSCRIBED AND S	WORN TO befor	e me this2	lst_ day	of <u>Octobe</u> r	,19 <u>85</u>	
			_ Lillano	S. Lit	tle		
	CONSERVATION DIVISION Wichita, Kansas My Commission Ex	pires:	Tiffany S.	Little,No†	ary Public		
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TIFFANY S. LITTLE NOTARY PUBLIC STATE OF KANSAS MY APPT. EXPIRES 8-11-89

Form CP-4 Revised 08-84