STAT	E O	F KA	NSA!	5			
STAT	E O	ORPO	RAT	ION	COHM	1221	0
200	Col	orad	o De	erby	Bul	ldln	g
Wich	1 ta	, Ka	nsas	s ['] 6'	7202		

WELL PLUGGING RECORD

15.159.	0257	0.0000
---------	------	--------

STATE CORPORATION COMMISSION	K. A. R82-3-117	API NUMBER N/A		
200 Colorado Derby Bullding Wichita, Kansas 67202		LEASE NAME Lee		
	TYPE OR PRINT	WELL NUMBER 1		
	NOTICE: Fill out completely and return to Cons. Div.	Ft. from S Section Line		
	office within 30 days.	Ft. from E Section Line		
LEASE OPERATOR Sterling D	SEC.27 TWP.20S RGE.6W XXXor(W)			
ADDRESS P.O. Box 129 Sterl	COUNTY Rice			
PHONE#(316) 278-2131 OPERA	Date Well Completed			
Character of Well Oil	Plugging Commenced 4-8-92			
(OII, Gas, D&A, SWD, Input, Wa	ter Supply Well)	Plugging Completed 4-13-92		
The plugging proposal was appr	oved on	(date)		
		(KCC District Agent's Name).		
Is ACO-1 filed?If				
		Bottom T.D. 3401		
Show depth and thickness of al		ns.		
OIL, GAS OR WATER RECORDS		RECEIVED SING RECORD KANSAS CORPORATION COMMISS		
Formation Content	From To Size	Put In Pulled out		
	10 3/4"	APR 2 0 1992		
	10 3/4"	3366' 2327' CONSERVATION DIVISION		
		- WICHITA, KS		
Describe in detail the manner	In which the well was plugged	, indicating where the mud fluid wa to the hole. If cement or other plug		
were used, state the charact	ter of same and depth place	d, fromfeet tofeet each set		
Sande	ed bottom to 3116', ran 7 sac	ks cement Shot pipe @2400', 2327', ment, pulled up to 300'circulated		
to su	irface.	ment, puried up to 300 circulated		
(If additional descr	ription is necessary, use BAC	K of this form.)		
Name of Plugging Contractor	KELSO CASING PULLING, IN	IC. License No. 6050		
Address P.O. Box 347 Cha				
NAME OF PARTY RESPONSIBLE FOR F		ling Drilling Company		
STATE OF Kansas				
		•		
above-described well, being fir	st duly sworn on oath, says:	mployee of Operator) or (Operator) o That I have knowledge of the facts		
statements, and matters here! the same are true and correct,	co hala ma God	he above-described well as filed tha		
, , , , , , , , , , , , , , , , , , , ,	(Signature)	Reself las		
	(Address)	P.O. Box 347 Chase, KS. 67524		
SUBSCRIBED AND	SWORN TO before me this17	day of April ,19 92		
		Deen Verburg		
My Commission	Expires:	Notary Public		
, 00//// 331011	Ctoto of	Kansas e		
	My Appt. Exp.	Revised 05-88		

Form CP-4 Revised 05-88