STATE OF KANSAS STATE CORPORATION COMMISSION 200 Colorado, Derby Building Wichita Kansas 67202 MANSAS CORP COMIT

2000 MAN 14 D 2: 39

WELL PLUGGING RECORD K.A.R.-82-3-117

office within 30 days.

) (-15	- 0	83	20849-006 Docket#D-20,95
API	NUMBER	NA	MX	Docket# $D-20,95$

	-		
LEASE	NAME_	Antrim	
		11 -4	

TYPE OR PRINT NOTICE: Fill out completely and return to Cons. Div.

WELL NUMBER #1

4629' Ft. from S Section Line 3300' Ft. from E Section Line

SEC. 17 TWP. 21 sRGE. 22 (E) or ((W)) LEASE OPERATOR American Warrior Inc COUNTY Hodgeman ADDRESS PO. box 399. Garden City, Ks. 67846 PHONE#315+275-2963 OPERATORS LICENSE NO. 4058Date Well Completed March 1982 Plugging Commenced 2-22-2000Character of Well SWD Plugging Completed 2-22-2000(Oll, Gas, D&A, SWD, input, Water Supply Well) The plugging proposal was approved on 2-21-2000(date)

(KCC District Agent's Name). District one Is ACO-1 filed? yes _if not, is well log attached? NO. NOLOGS ON FILE.

Producing Formation <u>CEDAR HILL</u> Depth to Top 910' Bottom 960' T.D. 1100'

Show depth and thickness of all water, oil and gas formations.

OIL, GAS OR WATER RECORDS

CASING RECORD

Formation	Content surface	From 269'	To O	Size 8-5/8	Put in 269'	Pulled out none
	production	4425 '	0	45	4425	none

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 plugs were used, state the character of same and depth placed, from __feet to __feet each set.

Ran thg. to 800' pump 60sks 60/40poz&400# hulls. pull thg. out of hole, pump 40sks cement. down braden head. @400# top off 4% csg with 10sks 40/sks total down braden head, 70sks down 4%;

(If additional description is necessary, use BACK of this form.)

Name of Plugging Contractor Swift Services inc License No. 32382

Address PO. Box 466, Ness City, Ks.76560

NAME OF PARTY RESPONSIBLE FOR PLUGGING FEES: American Warrior

_____ COUNTY OF Finney STATE OF Kansas

Kevin Wiles Ss (Employee of Operator) or (Operator) of 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 filled that (Signature) the same are true and correct, so help me God.

(Address) po.box 399, Garden City, Ks. 67846

SUBSCRIBED AND SWORN TO before me this DEBRA J. PURCELL Notary Public - State of Kansas
My Appt. Expires | 7 | 7 | 7 |
My Commission Expires: Notary Public

> Form Revised 05-88