

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

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

API NUMBER 15-007-22,238-00-00

LEASE NAME Shaw

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

WELL NUMBER #1

4900 Ft. from S Section Line

845 Ft. from E Section Line

SEC. 35 TWP. 32 RGE. 12W (E) or (W)

COUNTY Barber

Date Well Completed \_\_\_\_\_

Plugging Commenced 5/10/89

Plugging Completed \_\_\_\_\_

LEASE OPERATOR Molz Oil Company

ADDRESS R.R.#2, Box 54, Kiowa, KS. 67070

PHONE# (316) 296-4558 OPERATORS LICENSE NO. 6006

Character of Well D/A

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

The plugging proposal was approved on 5/10/89 (date)

Goodrow (KCC District Agent's Name).

Is ACO-1 filed? Yes If not, Is well log attached? \_\_\_\_\_

Producing Formation \_\_\_\_\_ Depth to Top \_\_\_\_\_ Bottom \_\_\_\_\_ T.D. \_\_\_\_\_

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

OIL, GAS AND WATER RECORDS | CASING RECORD

Formation	Content	From	To	Size	Put In	Pulled out
	Surface	0	302'	8-5/8"	302'	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.

40 sacks @ 730'

40 sacks @ 330'

10 sacks @ 40'

15 sacks rathole

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

Name of Plugging Contractor Allen Drilling License No. 5418

Address Great Bend, Kansas

NAME OF PARTY RESPONSIBLE FOR PLUGGING FEES: Molz Oil Company

STATE OF Kansas COUNTY OF Barber, ss.

Jim Molz

(Employee or 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 filed that the same are true and correct, so help me God.

(Signature) \_\_\_\_\_

(Address) \_\_\_\_\_

WITNESSED AND SWORN TO before me this 16 day of May, 19 89  
B. Ann Leader  
Notary Public

**B. ANN LEADER**  
NOTARY PUBLIC  
STATE OF KANSAS  
My Appt. Exp. 4-12-93

My Commission Expires: 4-12-93