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

WELL PLUGGING RECORD

TYPE OR PRINT PLEASE FILL OUT COMPLETELY AND MAKE REQUIRED AFFIDAVIT

API NUMBER	<u>15-007-21-937·</u>
LEASE NAMEI	Irencher
WELL MUMBER	#3

. А	ND MAKE K	E.OUTKE	D AFFIDA		OT LOCATION NWSWSE		
LEASE OPERATOR Hummon Corp.					C. <u>14</u> TWP. <u>325</u> RGE. 11(&X)OR		
ADDRESS 400 One Main Place Wichita, KS 67202					OUNTY Barber		
PHONE #(316) 263-8521 OPERATORS LICENSE NO					DATE WELL COMPLETED 11/5/84		
					PLUGGING COMMENCED 12/5/84		
Character of Well <u>D&A</u> (Oil, Gas, D&A, SWD, Input, Water	SUPPLY WE	LL)		PL	UGGING COMPLETED 12/13/84		
DID YOU NOTIFY THE KCC/KDHE JOINT	DISTRICT	OFFICE	PRIOR TO	D PLUGGING	THIS WELL? yes		
WHICH KCC/KDHE JOINT OFFICE DID YO	U NOTIFY?	Doc	lge City,	KS Lacey	and Metz		
Is ACC-1 FILED? yes IF NOT	, IS WELL	LOG A	TTACHED?	yes			
PRODUCING FORMATION	ДЕРТ	н то т	OP	ВОТ	томТ. D		
SHOW DEPTH AND THICKNESS OF ALL WA	TER, OIL	AND GA	S FORMAT	IONS•			
OIL, GAS OR WATER RECORDS	GAS OR WATER RECORDS CASING RECORD						
FORMATION. CONTENT	FROM	To	Size	PUT IN	PULLED OUT		
				208	None		
			4 1/2	3695	1870		
THE MUD FLUID WAS PLACED AND THE MITTHE HOLE. IF CEMENT OR OTHER PLUGS DEPTH PLACED, FROM FEET TO FEET Sand From 2586 to 2535 4sx cemes Sun pumped in 3sx hull 10sx jel comm 2% CC	WERE USE EACH SET nt with d	D STAT • <u>Pus</u> ump ba	E, THE CH h plug to iler 253!	ARACTER 0 5 2586 5 to 2500	F SAME AND		
Metz and Morgenstern on location (IF ADDITIONAL DESCRIPT	ION IS NE	TESSAR	Y LISE KA	ACK OF THI	S EODM.)		
Name of Plugging Contractor Cl Address Box 187, Medicine Lodge,	arke Corp	•	1) 00L <u>Li</u>	<u>101</u> 01 1111	_License No5105		
STATE OF Kansas	COUNTY OF		Barber	2	RECEIVED SSATE CORPORATION COMMISSIO		
(OPERATOR) OF ABOVE-DESCRIBED WELL I HAVE KNOWLEDGE OF THE FACTS, STATHE LOG OF THE ABOVE-DESCRIBED WELL CORRECT, SO HELP ME GOD.	, BEING F TEMENTS, A	IRST D AND MA	ULY SWORN TTERS HER	ON OATH,	INED AND What I		
CAREN J. McCULLOUGH NOTARY PUBLIC STATE OF KANSAS My Appt. Exp. 10 - 201-87			(Signa (Addre	<u></u>	and tooks		
SUBSCRIE	BED AND SV	WORN T	0 BEFORE	ME THIS	TDAY OF Dea 1984		
			$-\left(\begin{array}{c} c \\ c \end{array} \right)$	rien	OTARY PUBLIC		
MY COMMISSION EXPIRES: Jum 0 :	29, 198	7			J. T. J. D. L. J. G. L. J. J. G. L. J. J. G. L. J. G. L. J. G. L. J. J. J. G. L. J.		

FORM CP-4 REVISED 06-83