Notary Public.

STATE OF KANSAS STATE CORPORATION COMMISSION

Make Required Affidavit		WE	ELL PLU	GGING R	ECORD		
Mail or Deliver Report to: Conservation Division							
State Corporation Commission 212 No. Market		Barton	Committee	e 33 - 7	169 p	/m 11/mm	
Wichita, Kansas 67202	Location on "N	Barton County. Sec. 33 Twp. 16S Rge. (E) 11(W) Location as "NE/CNW%SW%" or footage from lines NW NW NE					
NORTH	Lease Owner Carl W. Boxberger						
0	Lease Name Bernstorf-Janke Well No. 1						
	Office Address P.O. Box 474, Great Bend, KS 67530 Character of Well (completed as Oil, Gas or Dry Hole) Oil						
-							
1	Date well completed 10-29 1940						
1 i 1 i 1		plugging filed				1-20 1984	
		plugging approve				1=29 19.84	
.	Plugging commenced 12-13 19.84						
1 1 1	Plugging completed 12-13 1984 Reason for abandonment of well or producing formation casing parted and casing collapsed at 1345 ft. If a producing well is abandoned, date of last production unknown 1981 Was permission obtained from the Conservation Division or its agents before plugging was com-						
<u> </u>							
Locate well correctly on above Section Plat	menced?V	<u>es</u> _					
Name of Conservation Agent who superv	rised plugging of th	nis well Gilber	rt Scheck				
Producing formation Arbuck	Le	Depth to top_33_	51_ Bottom	3362	Total Depth of	Well 3362 Feet	
Show depth and thickness of all water, o	oil and gas formatio	ons.					
OIL, CAS OR WATER RECORDS					•	CASING RECORD	
OIL, CAS OR WATER RECORDS		1	F	-	·	TABLE OF THE CORD	
FORMATION	CONTENT	FROM	TO	SIZE	PUT IN	PULLED OUT	
		surface	425	7"	425	none	
		surface	_3351	42"	33.51	none	
Lansing-Kansas City		3085	3351		ļ <u></u>		
Arbuckle		3351	3362		-		
						<u> </u>	
	rface - had : nd squeeze to		s for fir	st 150 sa	cks displa	ced then	
non th 600	ng hooked on gel and 3%	55 67 10 m	[1111 7	100T	TO TO	
with 6% gel	and 3% cacl max, pres. 300# CIP 100# completed 12-13-84						
3:15 pm		and 3% cacl max, pres. 300# CIP 100# completed 12-13-84					
			<u>'</u>		THOM CONT	Min -	
					it i	"11881 ₀₁₁₁	
				COMO	4 4 50		
				M/s	71//OAL 5		
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					- Sas	· · · · · · · · · · · · · · · · · · ·	
			 -				
							
	1	 -		·			
							
		al description is neces	sary, use BACK	of this sheet)			
Name of Plugging Contractor Sun		,					
Address <u>P.O. Box 169, Gre</u>	eat Bend, KS	<u>67<i>5</i>30</u>				·	
CTLET OF Verience		T	20				
STATE OF Kansas							
<u>Keith Lumpkins</u>						of the above-described	
well, being first duly sworn on cath, sa				nts, and matte	rs herein contair	ned and the log of the	
above-described well as filed and that t	the same are true s				0		
in the same of the		(Signature)X	Care,	(Doc	leeger		
The same of the sa				474. Gre		5 67520	
		- A			at Bend. KS Address)	S 67530	
Subscribed and Sworn to before	me this	7 TK · day o(_	Vecem	her	700	74	
			()	01 7	1. 1		
11/1/19/2012	an		- 12 m		any		