

**Lease Operator:** Carl Boxberger Oil, Inc.

**Address:** P.O. Box 1604 Great Bend, Kansas 67530

**Phone:** (620) 793-6032 **Operator License #:** 4707

**Type of Well:** Oil

**API:** 15-159-O1991-00-08

**Well Number:** 3

**Spot Location (QQQO):** SE NE NW

990 Feet from X North

990 Feet from East

2310 Feet from M West Section Line

Sec. 27 Twp. 18 S. R. 10 E. 9 West Rice

**County:** Rice

**Date Well Completed:** 10-3-47

**Plugging Completed:** 6-1-04

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### Oil, Gas or Water Records

<table>
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<th>Formation</th>
<th>Content</th>
<th>From</th>
<th>To</th>
<th>Size</th>
<th>Put In</th>
<th>Pulled Out</th>
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<td>2700'</td>
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**Describe in detail the manner in which the well is 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 depth placed, from ______ feet to ______ feet each set.**

Set CIBP @2600' with 2 sacks cement on top. Perforated 7" casing @1225', 875' & 280'. Ran tubing to 1225', pumped 50 sacks cement, pulled up to 875', pumped 50 sacks cement, pulled up to 280', pumped 165 sacks cement & circulated to surface on both sides. Pulled tubing & topped off with 50 sacks cement, 60/40 pos. 4% gel. Topped well off again with 45 sacks cement. Plugging Complete.

**Name of Plugging Contractor:** Mike’s Testing & Salvage, Inc. **License #:** 31529

**Address:** P.O. Box 467 Chase, Kansas 67524

**Name of Party Responsible for Plugging Fees:** Carl Boxberger Oil, Inc.

**State of Kansas County: Rice**

**Mike Kelso** (Employee of Operator) or (Operator) on 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, and the same are true and correct, so help me God.

(Signature) **P.O. Box 467** Chase, Kansas 67524

Note: Fill out COMPLETELY and return to Conservation Division at the address below within 30 days from plugging date.