

APPLICATION FOR PERMIT TO DRILL, DEEPEN OR PLUG BACK

APPLICATION TO DRILL DEEPEN PLUG BACK

NAME OF COMPANY OR OPERATOR MAINLINE USA INC. DATE Feb 9/81
227 1/2 S. MAIN ST. OTTAWA KANSAS
 Address City State

DESCRIPTION OF WELL AND LEASE			
Name of lease <u>BERTHA SLAGER</u>		Well number <u>3</u>	Elevation (ground) <u>896' (TM)</u>
WELL LOCATION (give footage from section lines) <u>1483</u> ft. from (N) (S) sec. line <u>1479</u> ft. from (E) (W) sec. line			
WELL LOCATION Section <u>35</u> Township <u>44</u> Range <u>33</u>		County <u>CASS</u>	
Nearest distance from proposed location to property or lease line: <u>165</u> feet		Distance from proposed location to nearest drilling, completed or applied - for well on the same lease: <u>1650</u> feet	
Proposed depth: <u>200'</u>	Rotary or Cable tools <u>ROTARY</u>	Approx. date work will start <u>FEBRUARY 16, 1981</u>	
Number of acres in lease: <u>160</u>		Number of wells on lease, including this well, completed in or drilling to this reservoir: <u>4</u> Number of abandoned wells on lease: <u>-</u>	
If lease, purchased with one or more wells drilled, from whom purchased: Name _____ Address _____		No. of Wells: producing _____ inactive _____ abandoned _____	
Status of Bond Single Well <input type="checkbox"/> Amt. _____ Blanket Bond <input checked="" type="checkbox"/> Amt. <u>\$20,000</u> <input checked="" type="checkbox"/> ON FILE <input type="checkbox"/> ATTACHED			
Remarks: (If this is an application to deepen or plug back, briefly describe work to be done, giving present producing zone and expected new producing zone) use back of form if needed.			
Proposed casing program:		Approved casing - To be filled in by State Geologist	
amt. <u>25'</u>	size <u>7"</u>	wt./ft. <u>27#</u>	cem. <u>YES</u>
<u>200'</u>	<u>2 3/8"</u>	<u>3.75#</u>	<u>TD to SURF</u>
_____	_____	_____	_____
_____	_____	_____	_____
I, the undersigned, state that I am the <u>PRODUCTION MANAGER</u> of the <u>MAINLINE USA INC</u> (company), and that I am authorized by said company to make this report; and that this report was prepared under my supervision and direction and that the facts stated therein are true, correct and complete to the best of my knowledge. Signature <u>Phillip D. Leiber</u>			

Permit Number 120148
 Approval Date: 2/11/81
 Approved By: Les. Wallace B. Howe

SAMPLES REQUIRED **RECEIVED**
 SAMPLES NOT REQUIRED
FEB 11 1981

Note: This Permit not transferable to any other person or to any other location.
 Remit two copies to: Missouri Oil and Gas Council
 P.O. Box 250 Rolla, Mo. 65401
 One will be returned for driller's signature

WATER SAMPLES REQUIRED @
 MO. OIL & GAS COUNCIL

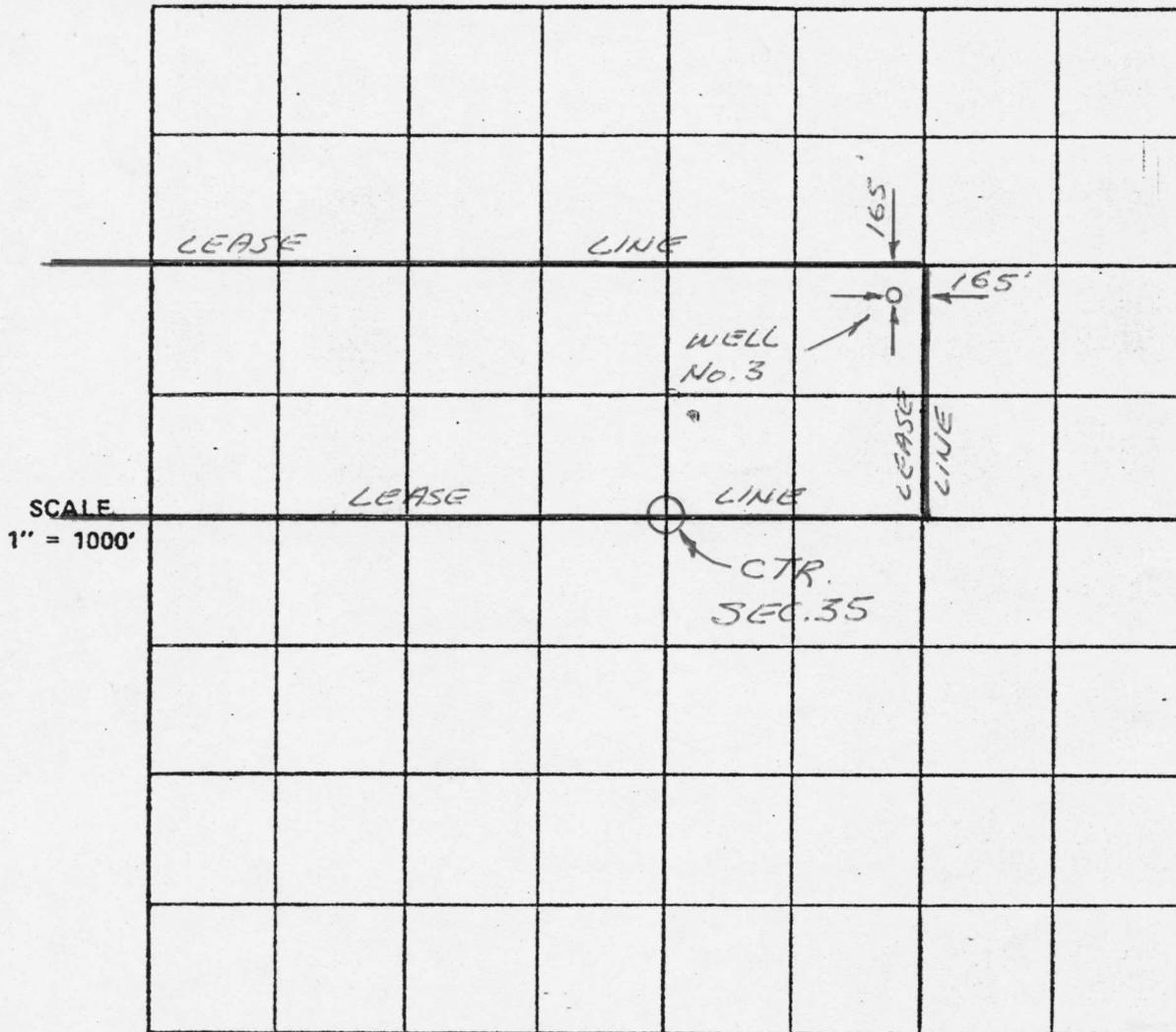
Approval of this permit by the Oil and Gas Council does not constitute endorsement of the geologic merits of the proposed well nor endorsement of the qualifications of the permittee.

WELL LOCATION PLAT

Owner: BERTHA M. SLAGER

Lease Name: BERTHA M. SLAGER County, CASS

1483' feet from (N) (S) line and 1479' feet from (E) (W) line of Sec. 35 Twp. 44 Range 33



REMARKS: LESSEE: MAINLINE U.S.A. INC.
227 1/2 SOUTH MAIN STREET
OTTAWA, KANSAS
WELL NO. 3

INSTRUCTIONS

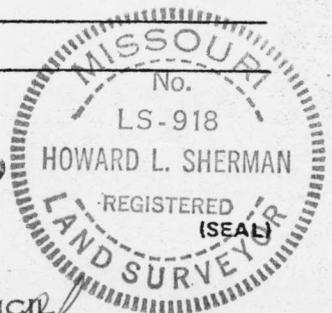
On the above plat, show distance of the proposed well from the two nearest lease and section lines, and from the nearest well on the same lease completed in or drilling to the same reservoir. If the location requested is not in conformance with the applicable well-spacing rules, show all off-setting wells to the proposed well. Do not confuse survey lines with lease lines. See rule 7 - 3 (b) for survey requirements.

Remit two copies to: Missouri Oil and Gas Council
 P.O. Box 250 Rolla, Mo. 65401
 One will be returned.

RECEIVED

FEB 11 1981

MO. OIL & GAS COUNCIL



Howard L. Sherman
 Registered Land Surveyor

MISSOURI OIL AND GAS COUNCIL

Form OGC-5

WELL COMPLETION OR RECOMPLETION REPORT AND WELL LOG

New Well Work-Over Deepen Plug Back Same Reservoir Different Reservoir Oil Gas Dry

Owner MAINLINE USA INC.		Address 105 East Madison, Iola, Kansas 66749	
Lease Name Slager, B.		Well Number 3	
Location 1483' fns1 1479' fes1		Sec. — TWP-Range or Block & Survey S-35- T-44 R-33	
County Cass	Permit number (OGC3 number) #20148		
Date spudded 2-13-81	Date total depth reached 2-13-81	Date completed, ready to produce Dry	Elevation (DF, RKB, RT or Gr.) feet 896
Total depth 184'	Elevation of casing hd. flange feet 897'		
Producing interval (s) for this completion Dry		Rotary tools used (interval) From to Drilling Fluid used Mud	Cable tools used (interval) From to NA
Was this well directionally drilled? No	Was directional survey made? No	Was copy of directional survey filed? No	Date filed No
Type of electrical or other logs run (list logs filed with the State Geologist) None			Date filed No

CASING RECORD

Casing (report all strings set in well—conductor, surface, intermediate, producing, etc.)						
Purpose	Size hole drilled	Size casing set	Weight (lb ft.)	Depth set	Sacks cement	Amt. pulled
Surf. Csg.	8 5/8"	7"	23.0	25	4	
Long String	5 1/8"	None				

TUBING RECORD

LINER RECORD

Size in.	Depth set ft.	Packer set at ft.	Size in.	Top ft.	Bottom ft.	Sacks cement	Screen (ft.)

PERFORATION RECORD

ACID, SHOT, FRACTURE, CEMENT SQUEEZE RECORD

Number per ft.	Size & type	Depth Interval	Amt. & kind of material used	Depth Interval
DRY				

INITIAL PRODUCTION

Date of first production DRY		Producing method (indicate if flowing, gas lift or pumping—if pumping, show size & type of pump:)					
Date of test	Hrs. tested	Choke size	Oil prod. during test bbls.	Gas prod. during test MCF	Water prod. during test bbls.	Oil gravity API (Corr)	
Tubing pressure	Casing pressure	Cal'ed rate of Production per 24 hrs.	Oil bbls.	Gas MCF	Water bbls.	Gas—oil ratio	

Disposition of gas (state whether vented, used for fuel or sold):

Method of disposal of mud pit contents:

Mud pits back filled

CERTIFICATE: I, the undersigned, state that I am the Landman of the MAINLINE USA INC. (company), and that I am authorized by said company to make this report; and that this report was prepared under my supervision and direction and that the facts stated therein are true, correct and complete to the best of my knowledge.

RECEIVED

MAR 02 1983

Jarome T. O'Connor
Signature
Landman *By Judy Sheehan*

PLUGGING RECORD

Owner KANSAS PETROLEUM PROPERTIES INC		Address Box 145 CHANUTE, KS 66720			
Name of Lease BERTHA SLAGER		Well No. 3	Permit Number (OGC-3 or OGC-3I number) 20148		
Location of Well 1483' FNL 1479' FEL		Sec-Twp-Rng or Block & Survey S35-44-35		County CASS	
Application to drill this well was filed in name of MAINLINE USA INC		Has this well ever produced oil or gas? NO	Character of well at completion (initial production) Oil (bbls/day) 0	Gas (MCF/day) 0	Dry? YES
Date Abandoned 7-7-83 11:45	Total depth 1841	Amount well producing prior to abandonment Oil (bbls/day) 0 Gas (MCF/day) 0		Water (bbls/day) 0	
Name of each formation containing oil or gas. Indicate which formation open to well bore at time of abandonment.		Fluid content of each formation	Depth interval of each formation	Size, kind, & depth of plugs used. Indicate zones squeeze cemented, giving amount cement.	
NOT KNOWN		NOT KNOWN	NOT KNOWN		
PLUGGING OPERATIONS - RAN IN 1" TO BRIDGE AT 135'. PULLED TO 125' AND CIRCULATED CEMENT TO SURFACE. (19 SXS) PULLED 1" AND FILLED HOLE W/ 1 SX TOTAL 20 SXS					
Size pipe	Put in well (ft)	Pulled out (ft)	Left in well (ft)	Give depth and method of parting casing (shot, ripped, etc.)	Packers and shoes
7"	?	3'	?	CUT OFF	
Was well filled with mud-laden fluid?			Indicate deepest formation containing fresh water.		
NAMES AND ADDRESSES OF ADJACENT LEASE OPERATORS OR OWNERS OF THE SURFACE					
Name		Address		Direction from this well:	
EDWARD LEWIS (SURFACE)		RR#1 CLEVELAND MO		WEST	
ROBERT HOCKER (")		" " "		NORTH	
RICHARD MERRISON (")		" " "		EAST	
WILLIS LEE (")		" " "		SOUTH	
Method of disposal of mud pit contents: EVAPORATION - PITS BACKFILLED & LEVELED.					
Use reverse side for additional detail. File this form in duplicate with					
CERTIFICATE: I, the undersigned, state that I am the CONSULTING ENGINEER of the KANSAS PETROLEUM PROPERTIES INC (Company), and that I am authorized by said company to make this report; and that this report was prepared under my supervision and direction and that the facts stated therein are true, correct, and complete to the best of my knowledge.					
				Signature K. Ryan RECEIVED	

OCT 11 1983

Plugging Release

For valuable consideration the receipt and sufficiency of which is hereby acknowledged, I, BERTHA SLAGER, owner of the real property subject to the oil and gas lease described as follows:

SE 1/4 NE 1/4 SEC 34 - T44N R33W AND
S 1/2 NW 1/4 & SW 1/4 NE 1/4 SEC 35 - TWP 44N R33W
CONTAINING 160 ACRES MORE OR LESS
ALL IN CASS COUNTY MISSOURI

have inspected my property and to the best of my knowledge all holes drilled for the purpose of oil and/or gas have been properly plugged.

Dated 7-12-83

Signed Bertha M. Slager

RECEIVED

OCT 11 1983

MO. OIL & GAS COUNCIL

Consolidated Oil Well Services, Inc.

211 West 14th Street
 P.O. Box 884 Chanute, Kansas 66720
 Phone: (316) 431-7690 (Office)
 (316) 431-9210 (Shop)

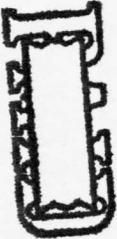
RECEIVED
 OCT 11 1983
 MO. OIL & GAS COUNCIL

INVOICE DATE	INVOICE NO.
7/19/83	7079

TERMS: Net 30 Days

A Finance Charge computed at 1 3/4 % per month (annual percentage rate of 21 %) will be added to balances over 30 days.

66092



PLEASE REFER TO THIS ACCOUNT NUMBER WHEN MAKING INQUIRIES

ACCOUNT NO.	LOCATION	LEASE AND WELL NO.	JOB TICKET NO.	EXTENDED PRICE
2563	3	#1, 2, 3, 4, SLAGER	7/07/83	0000000000
ITEM NUMBER	UNITS	DESCRIPTION	UNIT PRICE	EXTENDED PRICE
101	4	PROJECT PRICE	150.00	600.00
101	76	BULK CEMENT	5.00	380.00
401	1	TON MILEAGE	161.88	161.88
901	3	TRUCKING-VACUUM	44.00	132.00

Insured 7-31
POSTPAID

INVOICE 1-273.88 TAX 15.20
 PLEASE PAY 1,289.00
 Thank You!

Well No. 7-83	Customer's Acct. No. 2563	Sec. 34+35	Twp. 44	Range 33	Well No. & Farm. #1, 2, 3+4 Slager	Place of Destination Freeman
Name To Elkhound			Owner			County Cass
Billing Address			Contractor			State Mo.
& State			Well Owner Operator Contractor			

CEMENTING SERVICE DATA

TYPE OF JOB	CASING	HOLE DATA	PLUGS AND HEAD	PRESSURE	CEMENT LEFT IN CASING
Plugs	New	Bore Size 5 7/8	Bottom	Circulating 200	Requested
	Used	Total Depth 184	Top	Minimum 100	Necessity
	Size	Total Depth 196	Head	Maximum 400	Measured
Plugs	Weight	Cable Tool	FLOAT EQUIPMENT		Sacks Cement 76
	Depth	Rotary <input checked="" type="checkbox"/>	Type & Brand		50/50 Poz Mix
	Type		Admixes		

FRACTURING - ACIDIZING SERVICE DATA

Fracturing Fluid	Breakdown Pressure from		psi to	psi
Operating Pressures: Maximum	psi	Minimum	psi	Avg. Pump Rate
Gals. Treating Acid	Type		Open Hole Diameter	
Treating Through: Tubing	Casing	Annulus	Size	Weight
Perforations	Pay Formation Name		Depth of Job	Ft.

INVOICE SECTION

CEMENTING				FRACTURING - ACIDIZING			
Pumping Charge 4	Office Use	\$600.00	Pumping Charge	Office Use	\$		
Pumping Charge	@		Pumping Charge	@			
76 Sacks Bulk Cement	@	1101 380.00	12x30 Sand	@			
Ton Mileage on Bulk Cement 60	@	6401 161.88	10x20 Sand	@			
Premium Gel	@		x Sand	@			
Flo-Seal	@		Ton Mileage	@			
Calcium Chloride	@		Gals., Acid	@			
Plug	@		Chemicals	@			
Equipment	@			@			
- 21 SX	@			@			
- 19 SX	@			@			
- 20 SX	@		Potassium Chloride	@			
- 16 SX	@		Rock Salt	@			
Granulated Salt	@		Water Gel	@			
Transport Truck (Hrs.)	@		Transport Truck (Hrs.)	@			
Vac Truck (3 Hrs.)	@	44 00 6201 132.00	Vac Truck (Hrs.)	@			
Fuel Surcharge	@		Fuel Surcharge	@			
		Tax 15.20					

Finance Charge computed at 1% per month annual percentage rate of 21% will be added to balance over 30 days. Total **\$1289.08**

RECEIVED
 OCT 11 1983
 MO. OIL & GAS COUNCIL

Permit #: 20148

Date Issued: 2-11-81

County: Cass

Date Cancelled: _____

CONFIDENTIAL UNTIL: _____

Date Plugged: 7-12-83

COMMENTS:

OGC FORMS	Date Received
1	
2	
3	<u>2-11-81</u>
3i	
4	<u>2-11-81</u>
4i	
5	<u>3-2-83</u>
6	
7	<u>10-11-83</u>
8	
11	
12	
Misc. Form 2	

	TYPE	ID #	Date Received
Logs			
Samples	chip core		
	water core		
Analyses			
Additional Submitted Data:			