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PLUG & ABANDONMENT FORM

API NO. 30-025-24474
OPERATOR M & W of Lexington
LEASE NAME Cities Service State
WELL NO. #1
SEC. 26 TWP. 14 RANGE 34 UNIT E

Date plugging operations began - 01-03-92

Date plugging operations completed - _____

Name of plugging company - Baker Well Service

Comments: _____

Signed By: Jack Griffin

Date: 01-22-92