

STATE OF KANSAS  
STATE CORPORATION COMMISSION  
130 S. Market, Room 2078  
Wichita, KS 67202

WELL PLUGGING RECORD  
K.A.R.-82-3-117

API NUMBER 065-22926-00-00

LEASE NAME B-MORRIS

WELL NUMBER 1

RECEIVED  
NOV 19 2003  
KCC WICHITA

TYPE OR PRINT  
NOTICE: Fill out completely and return  
to Cons. Div. office within 30 days.

2772 Ft. from (S) Line of Section (circle one)

2537 Ft. from (E) Line of Section (circle one)

LEASE OPERATOR RON'S OIL OPERATIONS, INC

SPOT LOCATION SW - SW - SW - NE

ADDRESS 1889 200TH AVE

SEC. 29 TWP. 7 S. RGE 24 (E) or (W)

CITY, STATE, ZIP PENOKEE KS 67659

COUNTY GRAHAM

PHONE#(785) 421-2409 OPERATORS LICENSE NO. 6861

Date Well Completed 8-5-03

Character of Well DRY  
(Oil, Gas, D&A, SWD, Input, Water Supply Well)

Date Plugging Commenced 8-5-03

Date Plugging Completed 8-5-03

The plugging proposal was approved on 8-5-03 (date)

by KCC - HAYS OFFICE PER STATE REGULATIONS (KCC District Agent's Name)

Is ACO-1 filed? YES If not, is well log attached?

Producing Formation(s) \_\_\_\_\_ Depth to Top \_\_\_\_\_ Bottom \_\_\_\_\_ T.D. 4000

Show depth and thickness of all water, oil and gas formations.

OIL, GAS OR WATER RECORDS

CASING RECORD

FORMATION	CONTENT	FROM	TO	SIZE	PUT IN	PULL OUT
SURFACAE	com3%cc2%gel	150sks	207	8 5/8	202 207	0

Describe in detail the manner in which the well was 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 and depth placed, from \_\_\_\_\_ feet to \_\_\_\_\_ feet each set.

1st plug 44# dp at 2175' mixed 25 sks 60/40 pos 6%gel 4#floseal displaced to balance 2nd plug at 1300' mixed a 100 sks 60/40 pos 6%gel displaced to balance 3rd plug at 260' mixed 40 sks 60/40 pos 6%gel displace to balance top plug at 40' mixed 10 sks in the ratho.  
(If additional description is necessary, use BACK of this form.)

Name of Plugging Contractor ANDY ANDERSON dba: A & A PRODUCTION

License No. 30076

Address PO BOX 100 HILL CITY KS 67642

NAME OF PARTY RESPONSIBLE FOR PLUGGING FEES: RON'S OIL OPERATIONS, INC

STATE OF Kansas COUNTY OF Graham, ss.

Ron Nickelson (Employee of Operator or (Operator) of 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 that the same are true and correct, so help me God.

(Signature) Ronald Nickelson

(Address) 1889 200TH AVE PENOKEE KS 67659

SUBSCRIBED AND SWORN TO before me this 16 day of November, 2003

My Commission Expires Jan 21, 2004  
Rita A. Anderson Notary Public

NOTARY PUBLIC  
STATE OF KANSAS

RITA A. ANDERSON  
NOTARY PUBLIC  
STATE OF KANSAS  
My App. Exp. \_\_\_\_\_

Form CP-4  
Revised 12-92