

Notice: Fill out COMPLETELY and return to Conservation Division at the address below within 60 days from plugging date.

KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION WELL PLUGGING RECORD K.A.R. 82-3-117

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DEC 08 2003

KCC WICHITA

Form CP-4 December 2003 Type or Print on this Form Form must be Signed All blanks must be Filled

Lease Operator: D.E. Exploration, Inc.

Address: P.O. Box 128 Wellsville, KS 66092-0128

Phone: (785) 883-4057 Operator License #: 4567

Type of Well: Oil Docket #: (Oil, Gas D&A, SWD, ENHR, Water Supply Well, Cathodic, Other) (If SWD or ENHR)

The plugging proposal was approved on: 11-20-03 (Date)

by: Jack Robinson (KCC District Agent's Name)

Is ACO-1 filed? Yes No If not, is well log attached? Yes No

Producing Formation(s): List All (If needed attach another sheet)

Bartlesville Depth to Top: 841' Bottom: 847' T.D. 904'

API Number: 15 - 091-21,901 - 00 - 00

Lease Name: Sanders

Well Number: #3

Spot Location (QQQQ): NW - NE - NW -

5060' Feet from North / South Section Line

3520' Feet from East / West Section Line

Sec. 12 Twp. 15 S. R. 21 East West

County: Johnson

Date Well Completed: 11-7-87

Plugging Commenced: 12-2-03

Plugging Completed: 12-2-03

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

Table with columns: Oil, Gas or Water Records (Formation, Content) and Casing Record (Surface Conductor & Production) (From, To, Size, Put In, Pulled Out). Row 1: Bartlesville, Oil, 841', 847', 7", 20', 0'-Cemented to Surface. Row 2: 2 7/8", 896.15', 0'-Cemented to Surface.

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 (bottom), to (top) for each plug set.

Consolidated hooked to 2 7/8" L.S. and pumped 25 sacks to squeeze shut in 1000 PSI.

Name of Plugging Contractor: Consolidated Oil Well Services, Inc. License #: 31440

Address: P.O. Box 884 Chanute, KS 66720

Name of Party Responsible for Plugging Fees: D.E. Exploration, Inc.

State of Kansas County, Franklin, ss.

Douglas G. Evans, President

(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 is as filed, and the same are true and correct, so help me God.

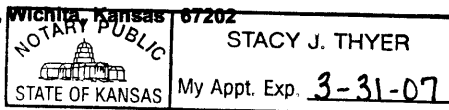
(Signature) [Handwritten Signature]

(Address) P.O. Box 128 Wellsville, KS 66092-0128

SUBSCRIBED and SWORN TO before me this 4th day of December, 20 03

[Signature] Notary Public My Commission Expires: 3-31-07

Mail to: KCC - Conservation Division, 130 S. Market - Room 2078, Wichita, Kansas 67202



3 05

To: STATE CORPORATION COMMISSION
Wichita State Office Bldg. - PLUGGING SECTION
130 S. Market, Room 2078
Wichita, Kansas 67202

API NUMBER 15-091-21,901
NWNENW4 Sec/Twp/Rge 12-15-21E
5060 feet from south section line
3520 feet from east section line

TECHNICIAN'S PLUGGING REPORT

Operator License # 4567
Operator: D E EXPLORATION INC
Name & 4567 PO BOX 128
Address WELLSVILLE, KS 66092

Lease/Well# SANDERS #3
County JOHNSON
Well Total Depth 904 feet
Production Pipe: 2 7/8 Size Feet 896
Surface Casing: 7 Size Feet 20
D & A

AB oil well Gas Well _____ SWD Well/ Input Well _____

Other well as hereinafter indicated: _____

Plugging Contractor: CONSOLIDATED OIL WELL SERVICES Lic. # 31440

Address: OTTAWA KS.

Company to plug at: Hour: AM Day: _____ 2 Month: 12 2003

Plugging proposal received from: DOUG EVANS

Company Name: D E EXPLORATION Phone: 785-883-4057

Were: FILL TD TO SURF WITH CEMENT AND SQUEEZE

Plugging Proposal Received by: ROBISON J.

Plugging attended by Agent: All Part _____
TECHNICIAN
None _____

Operations Completed: Hour: AM Day: _____ 2 Month: 12 2001

Actual Plugging Report: CONSOLIDATED HOOKED TO L. S. AND PUMPED 25 SX TO SQUEEZE
1000 PSI

Remarks: WELL ALT 2 COMPLETED

(If additional description is necessary, use BACK of this form.)

I DID observe this plugging.

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Signed:


TECHNICIAN

CONSOLIDATED OIL WELL SERVICES, INC.
 211 W 14TH STREET, CHANUTE, KS 66720
 620-431-9210 OR 800-457-9676

TICKET NUMBER **29930**
 LOCATION **Attawa**
 FOREMAN **Bill Zabel**

TREATMENT REPORT

Well #s **1, 3, 2, 4**

DATE	CUSTOMER #	WELL NAME	FORMATION
12-2-03	2654	Sanders	
SECTION	TOWNSHIP	RANGE	COUNTY
12	15	21	Jo
CUSTOMER			
Doug Evans			
MAILING ADDRESS			
P.O. Box 128			
CITY			
Wellsville			
STATE		ZIP CODE	
Ks		66092	
TIME ARRIVED ON LOCATION			
9:00 AM to 12:00 PM			

TRUCK #	DRIVER	TRUCK #	DRIVER
164	Bond W.		
369	Aaron		
230	Mitch	Chapman	
322	Bill Z.		

TYPE OF TREATMENT

<input type="checkbox"/> SURFACE PIPE	<input type="checkbox"/> ACID BREAKDOWN
<input type="checkbox"/> PRODUCTION CASING	<input type="checkbox"/> ACID STIMULATION
<input checked="" type="checkbox"/> SQUEEZE CEMENT	<input type="checkbox"/> ACID SPOTTING
<input checked="" type="checkbox"/> PLUG & ABANDON	<input type="checkbox"/> FRAC
<input type="checkbox"/> PLUG BACK	<input type="checkbox"/> FRAC + NITROGEN
<input type="checkbox"/> MISF. PUMP	<input type="checkbox"/>
<input type="checkbox"/> OTHER	<input type="checkbox"/>

PRESSURE LIMITATIONS

	THEORETICAL	INSTRUCTED
SURFACE PIPE		
ANNULUS LONG STRING		
TUBING		

WELL DATA	
HOLE SIZE	PACKER DEPTH
TOTAL DEPTH	PERFORATIONS
	SHOTS/FT
CASING SIZE	OPEN HOLE
CASING DEPTH	
CASING WEIGHT	TUBING SIZE
CASING CONDITION	TUBING DEPTH
	TUBING WEIGHT
	TUBING CONDITION
TREATMENT VIA	

INSTRUCTION PRIOR TO JOB **Squeeze Plug & Abandon 5 wells with 50/50 Pot 4% Gel & Cartraced Hulls mixed in. (about 114 gal & 300 Hulls)**

AUTHORIZATION TO PROCEED

TITLE

DATE

Bill Zabel 12-2-03

TIME AM/PM	STAGE	BBL'S PUMPED	INJ RATE	PROPPANT PPG	SAND / STAGE	PSI	
Well #	Size	Depth	Treatment				BREAKDOWN PRESSURE
#1	2 1/2"	Approx 880'	mix gel + sand 20 gal			1500 psi	DISPLACEMENT
#3	2 1/2"	Approx 880'	mix gel + sand 27 gal			1500 psi	MIX PRESSURE
#2	2 1/2"	Approx 880'	mix gel + sand 20 gal			1500 psi	MIN PRESSURE
#4	2 1/2"	Approx 880'	mix gel + sand 27 gal			1500 psi	ISIP
							15 MIN.
							MAX RATE
							MIN RATE

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