

To:

STATE CORPORATION COMMISSION

Wichita State Office Bldg. - PLUGGING SECTION

130 S. Market, Room 2078

Wichita, Kansas 67202

TECHNICIAN'S PLUGGING REPORT

Operator License # 101Operator: STATE OF KANSASName & FEE FUND

Address _____

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

Other well as hereinafter indicated: _____

Plugging Contractor: K-W WELL SERVICE

Lic. #

3097Address: 19450 FORD ROAD, CHANUTE, KANSAS 66720Company to plug at: Hour: _____ Day: 13 Month: 11 2003

Plugging proposal received from: _____

Company Name: _____ Phone: _____

Were: _____

Plugging Proposal Received by:

TONY WILLIAMS

Plugging attended by Agent: All _____ Part _____

TECHNICIAN
XXX None _____Operations Completed: Hour: _____ Day: 13 Month: 11 2003Actual Plugging Report: RAN 1 INCH PIPE TO 800 FEET INSIDE OF CASING AND TO 675 FEET
BETWEEN CASING AND SURFACE PIPE. FILLED WELL BOTTOM TOP USING A TOTAL OF
214 SACKS OF PORTLAND CEMENT.Remarks: CONTROL NO. 20030107-022(If additional description is necessary, use BACK of this form.)

I DID observe this plugging.

Signed:

Tony Williams
TECHNICIAN

RECEIVED

DEC 04 2003

KCC WICHITA