

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: _____ 2 Month: 12 2003

Plugging proposal received from: _____

Company Name: _____ Phone: _____

Were: _____

Plugging Proposal Received by:

TONY WILLIAMSPlugging attended by Agent: All XXX Part _____

TECHNICIAN

None _____

Operations Completed: Hour: _____ Day: _____ 2 Month: 12 2003Actual Plugging Report: RAN 1 INCH PIPE TO 800 FEET AND FILLED WELL BOTTOMTO TOP USING 52 SACKS OF PORTLAND CEMENT.Remarks: CONTROL NO. 20030107-026(If additional description is necessary, use BACK of this form.)

I did observe this plugging.

Signed:



TECHNICIAN

RECEIVED

DEC 19 2003

KCC WICHITA

15-125-19788-00-00

API NUMBER NE

NW-NW SE Sec/Twp/Rge 19-32-14E

2189 feet from south section line

1868 feet from east section line

Lease/Well# SIMMONS # 26

County MONTGOMERY

Well Total Depth 800 feet

Production Pipe: 4.5" Size Feet 800

Surface Casing: 8" Size Feet N/A

D & A _____