

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

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

API NUMBER 15-⁰⁹⁷907-20364-0001

LEASE NAME Schmidt

WELL NUMBER 1

1650 Ft. from S Section Line W

2310 Ft. from E Section Line

SEC. 2 TWP. 29 RGE. 19W (E) or (W)

COUNTY Kiowa

OPERATOR L.B. EXPLORATION, INC.
ADDRESS 2432 Crestline Wichita, Kansas 67205

RECEIVED
DEC 18 2003
KCC WICHITA

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

PHONE (785) 252-8034 OPERATORS LICENSE NO. 33186 33186 Date Well Completed _____

Character of Well Oil Gas per CP 2/3 33499 Plugging Commenced 11-26-03

(Oil, Gas, D&A, SWD, Input, Water Supply Well) Plugging Completed 12-3-03

Plugging proposal was approved on _____ (date)
Steve Middleton (KCC District Agent's Name).

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

Producing Formation _____ Depth to Top _____ Bottom T.O. 5052'

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

WATER, GAS OR WATER RECORDS | CASING RECORD

Formation	Content	From	To	Size	Put In	Pulled out
<u>Surf Prod</u>				<u>8-5/8"</u>	<u>289'</u>	<u>None</u>
				<u>4-1/2"</u>	<u>5051'</u>	<u>2125'</u>

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 section. Plugged off bottom with sand to 4700' and 4 sacks cement. Cut pipe loose @2125', pulled up to 1460', pumped 15 sacks ge, 50 sacks cement, pulled up to 690', pumped 50 sacks cement, pulled up to 300', pumped 50 sacks cement, laved rest of pipe down and topped off with 15 sacks cement. 60/40 pos, 6% gel. Plugging Complete.

Name of Plugging Contractor Mike's Testing & Salvage, Inc. License No. 31529

Address P.O. Box 467 Chase, Kansas 67524

Name of Party Responsible for Plugging Fees: L.B. Exploration, Inc. 33186

State of Kansas County of Rice, SS.

Mike Kelso (Employee of Operator) or (Operator)

Above-described well, being first duly sworn on oath, says: That I have knowledge of the facts and statements, and matters herein contained and the log of the above-described well as filed to the same are true and correct, so help me God.

(Signature) Mike Kelso

(Address) P. O. Box 467 Chase, KS 67524

SUBSCRIBED AND SWORN TO before me this 17th day of December, 2003

James Herzberg
Notary Public

My Commission Expires:

