

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

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

API NUMBER 15-155-21086-80-00

LEASE NAME Crow

WELL NUMBER 1-A

330 Ft. from <sup>N</sup> Section Line

1650 Ft. from E Section Line

SEC. 5 TWP. 24 RGE. 8W (E) or (W)

COUNTY Reno

Date Well Completed 6-13-86

Plugging Commenced 12-16-03

Plugging Completed 12-18-03

DEC 29 2003

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

KCC WICHITA

OPERATOR CLINTON PRODUCTION, INC.

ADDRESS 330 N. Armour Wichita, Kansas 67206

PHONE (316) 684-7996 OPERATORS LICENSE NO. 5585

Character of Well Oil

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

Plugging proposal was approved on \_\_\_\_\_ (date)

Jack Luthi (KCC District Agent's Name).

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

Producing Formation \_\_\_\_\_ Depth to Top \_\_\_\_\_ Bottom \_\_\_\_\_ T.D. 3735'

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	Pulled out
<u>Suspa</u>			<u>255</u>	<u>8-5/8"</u>	<u>255'</u>	<u>None</u>
<u>Prod</u>			<u>3730</u>	<u>5-1/2"</u>	<u>3730'</u>	<u>2620'</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 surface. Set CIRP @3440' with 2 sacks cement on top. Cut pipe loose @2620', pulled up to 1350', pumped 15 sacks gel, 35 sacks cement, pulled up to 800 ftl, pumped 35 sacks cement, pulled to 305', and circulated 150 sacks cement to surface. 60/40 pos, 4% 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: Clinton Production, Inc.

State of Kansas County of Rice, ss.

Mike Kelso (Employee of Operator) or (Operator)

do hereby certify that the above-described well, being first duly sworn on oath, says: That I have knowledge of the facts 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) [Signature]

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

SUBSCRIBED AND SWORN TO before me this 23rd day of December, 20 03

My Commission Expires: \_\_\_\_\_

NOTARY PUBLIC - State of Kansas  
IRENE HERZBERG  
My Appt. Exp. 8-24-05