

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

RECEIVED
DEC 31 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: Rama Operating Co., Inc.
Address: P.O. Box 159
Phone: (620) 234-5191 Operator License #: 3911
Type of Well: SWD Docket #: D-6158
(Oil, Gas D&A, SWD, ENHR, Water Supply Well, Cathodic, Other) (If SWD or ENHR)
The plugging proposal was approved on: 12-18-03 (Date)
by: Herb Deines (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)

Depth to Top: _____ Bottom: _____ T.D. 3792

Depth to Top: _____ Bottom: _____ T.D. _____

Depth to Top: _____ Bottom: _____ T.D. _____

API Number: 15-009-04909-00-01
Lease Name: Workman
Well Number: 17
Spot Location (QQQQ): _____ - Ne - Nw - Sw
2310 Feet from North / South Section Line
990 Feet from East / West Section Line
Sec. 16 Twp. 20 S. R. 12 East West
County: Barton
Date Well Completed: 19
Plugging Commenced: 12-18-03
Plugging Completed: 12-22-03

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

Oil, Gas or Water Records		Casing Record (Surface Conductor & Production)				
Formation	Content	From	To	Size	Put In	Pulled Out
Arbuckle		3510	3792	8 5/8	654	0
				5 1/2	3437	0

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.

Ran tubing to 450', circulated hole with 50 sacks, pulled tubing, filled hole with 10 sacks, pressured casing to 1,000 psi.

Pumped 140 sacks between 5 1/2 and 8 5/8. Shut in. Next day pumped 100 sacks and 150# hulls between 5 1/2 and 8 5/8, shut in. 100 psi.

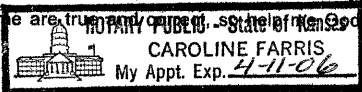
Name of Plugging Contractor: Allied Cementing/Khina Well Service License #: 7023

Address: _____

Name of Party Responsible for Plugging Fees: Rama Operating Co. Inc

State of Kansas County, Stafford, ss.

Robin L. Austin (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.



(Signature) [Handwritten Signature]

(Address) P.O. Box 159, Stafford, KS. 67578

SUBSCRIBED and SWORN TO before me this 30th day of December, 20 03

Caroline Farris My Commission Expires: 4-11-06
Notary Public