

API NUMBER 15-097-21,496-00-00

LEASE NAME Smith Cobb

WELL NUMBER #1

330 Ft. from S Section Line

4840 Ft. from E Section Line

SEC. 21 TWP. 30 RGE. 18 (E) or (W)

COUNTY Kiowa

Date Well Completed 2/2/03

Plugging Commenced 10/15/03

Plugging Completed 10/16/03

RECEIVED
 FEB 05 2004
 KCC WICHITA

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

LEASE OPERATOR Oil Producers, Inc. of Kansas

ADDRESS P.O. Box 8647

PHONE 316) 681-0231 OPERATORS LICENSE NO. 8061

Character of Well oil/gas

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

The plugging proposal was approved on 10/0/2003 (date)

by District #1 Scott Alberg (KCC District Agent's Name).

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

Producing Formation _____ Depth to Top _____ Bottom T.O. 5130

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>STEELEVILLE</u>		<u>3489</u>		<u>95</u>	<u>5293</u>	<u>2810'</u>
<u>Prod</u>		<u>3290</u>	<u>5293</u>	<u>4.5</u>	<u>5293</u>	<u>300'</u>
<u>SUMS</u>		<u>734</u>	<u>8625</u>	<u>734</u>	<u>734</u>	<u>0</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 plug were used, state the character of same and depth placed, from feet to feet each set
Sanded Bottom to 3350' Bailed 4 SKS of Portland Ripped 2810 pulled to 1100'
pumped 159E/ 50 SKS pulled to 750' pumped 50 SKS pulled to 300' pumped 40 SKS
pulled to 40' pumped to SKS Hole Stopped Fall

Name of Plugging Contractor Quality Well Service License No. 31925

Address 401 W MAIN LYONS, KS 67554

NAME OF PARTY RESPONSIBLE FOR PLUGGING FEES: Oil Producers, Inc. of Kansas

STATE OF Kansas COUNTY OF Sedgwick, ss.

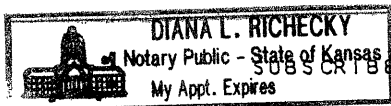
John S. Weir

(Employee of Operator) or (Operator) or

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 as filed and the same are true and correct, so help me God.

(Signature) [Signature]

(Address) P.O. Box 8647, Wichita, Ks. 67208



SUBSCRIBED AND SWORN TO before me this 3rd day of February, 2004

[Signature]
 Diana L. Richecky Notary Public

My Commission Expires 1/12/08

USE ONLY ONE SIDE OF EACH FORM