

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

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

API NUMBER 15-051-25012 00-00

LEASE NAME KOHL

WELL NUMBER 1-19

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

2020 Ft. from S Section Line

950 Ft. from <sup>W</sup>E Section Line

SEC. 19 TWP. 11 RGE. 19W (E) or (W)

COUNTY Ellis

LEASE OPERATOR MURFIN DRILLING CO., INC.

ADDRESS 250 N. Water, Suite 300 Wichita, Ks. 67202

PHONE (316) 267-3241 OPERATOR'S LICENSE NO. 30606 **RECEIVED**

Character of Well Oil

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

**FEB 05 2004**  
**KCC WICHITA**

A plugging proposal was approved on \_\_\_\_\_ (date)

Bruc Basye (KCC District Agent's Name).

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

Producing Formation \_\_\_\_\_ Depth to Top \_\_\_\_\_ Bottom \_\_\_\_\_ T.D. 3680'

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>Sand Prod.</u>			<u>1352</u>	<u>8-5/8"</u>	<u>1352'</u>	<u>None</u>
			<u>3680</u>	<u>5-1/2"</u>	<u>3680'</u>	<u>2436'</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 are used, state the character of same and depth placed, from \_\_\_\_\_ feet to \_\_\_\_\_ feet each side. Plugged off bottom with sand to 3500' and 5 sacks cement. Cut casing loose @2436', pulled up to 1980', pumped 165 sacks cement with 200# hulls, pulled up to 1360', pumped 50 sacks cement, pulled up to 685', circulated 100 sacks cement to surface. 60/40 pos, 10% gel. Layed down rest of pipe. 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: Murfin Drilling Company, Inc.

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) [Signature]

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

SUBSCRIBED AND SWORN TO before me this 4th day of February, 2004

[Signature]  
Notary Public

My Commission Expires:

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

Form CP  
Revised 05-