

STATE OF KANSAS  
 STATE CORPORATION COMMISSION  
 200 Colorado Derby Building  
 Wichita, Kansas 67202

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

15-147-20184-00-00  
 API NUMBER \_\_\_\_\_

LEASE NAME J-IMM

WELL NUMBER 2

4950 Ft. from S Section Line

660 Ft. from E Section Line

SEC. 09 TWP. 1-S RGE. 18 (S) or (W)

COUNTY Phillips

Date Well Completed 1-28-75

Plugging Commenced 7-12-93

Plugging Completed 7-12-93

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

LEASE OPERATOR Eagle River Energy Corp

ADDRESS 7060 S. Yale Suite 609 Tulsa OK 74136

PHONE# (918) 494-8928 OPERATORS LICENSE NO. 31070

Character of Well OIL

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

The plugging proposal was approved on 5-21-93 (date)

by David P Williams (KCC District Agent's Name).

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

Producing Formation LANSING K-C Depth to Top 3265 Bottom 3445 T.D. 3483

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>LANSING K-C</u>	<u>OIL &amp; WATER</u>			<u>8 5/8</u>	<u>242</u>	<u>0</u>
				<u>6</u>	<u>3483</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 plugs were used, state the character of same and depth placed, from \_\_\_\_\_ feet to \_\_\_\_\_ feet each section.  
Perforate DAKOTA + ANHYDRITE - MIXED + PUMPED 4 SX GEL w/  
50 SX CEMENT 15 SX GEL 175 SX CEMENT WAIT 30 MIN  
PUMP 50 SX CEMENT ST PSI = 500#  
MIXED + PUMPED 25 SX CEMENT DOWN SURFACE PIPE.  
 (If additional description is necessary, use BACK of this form.)

Name of Plugging Contractor Allied Cementing Co., Inc. License No. \_\_\_\_\_

Address P.O. Box 31 Russell KS 67665

NAME OF PARTY RESPONSIBLE FOR PLUGGING FEES: Eagle River Energy Corp.

STATE OF KANS. COUNTY OF Barton, ss.

Jerry L Rice (Employee of Operator) or (Operator)

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

(Signature) Jerry L Rice

(Address) Box 520 Great Bend KS 67530

SUBSCRIBED AND SWORN TO before me this 2<sup>nd</sup> day of August, 19 93

Shirley M. Bide  
 Notary Public

My Commission Expires: 10/5/96