

Notice: Fill out COMPLETELY and return to Conservation Division at the address below within 30 days from plugging date.

RECEIVED KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION WELL PLUGGING RECORD K.A.R. 82-3-117

Form CP-4 December 2003 Type or Print on this Form Form must be Signed All blanks must be Filled

MAR 10 2004

KCC WICHITA

Lease Operator: Fidelity Energy

Address: 64 N. Clark Sullivan, MO 63080

Phone: 620 336-3912 Operator License #: 31234

Type of Well: D&A Oil & Gas Docket #: (Oil, Gas D&A, SWD, ENHR, Water Supply Well, Cathodic, Other) (If SWD or ENHR)

The plugging proposal was approved on: 1/28/04 (Date)

by: Tony Williams (KCC District Agent's Name)

Is ACO-1 filed? [X] Yes [ ] No If not, is well log attached? [ ] Yes [X] No

Producing Formation(s): List All (if needed attach another sheet)

Table with 4 columns: Formation Name, Depth to Top, Bottom, T.D. Rows include Riverton and Mulkey.

API Number: 15 125-301710000

Lease Name: Haynes

Well Number: #4

Spot Location (QQQQ): SE SW NE NE

4060 Feet from [ ] North / [X] South Section Line

900 Feet from [X] East / [ ] West Section Line

Sec. 33 Twp. 32 S. R. 14 [X] East [ ] West

County: MG

Date Well Completed: 10/03

Plugging Commenced: 1/30/04 2/19/04

Plugging Completed: 2/19/04

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

Table with 7 columns: Oil, Gas or Water Records (Formation, Content), Casing Record (Surface Conductor & Production) (From, To, Size, Put In, Pulled Out). Row 1: Surf, 20, 8 5/8, 20', None.

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.

Saturday- broke down. 2/18/04- Ran 2" to T.D. 1400? Pumped 160sx type A Portland pulled 2".

2/19/04- Ran 2" and tagged cement at 434' circulated to surface. Total cement 220 sacks.

Name of Plugging Contractor: Co. Tools License #:

Address:

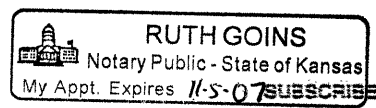
Name of Party Responsible for Plugging Fees:

State of County ss.

(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. so help me God.

(Signature) [Handwritten Signature]

(Address)



SWORN TO before me this 9th day of March 20 04. Notary Public [Signature] My Commission Expires: 11-5-2007