WELL PLUGGING RECORD STATE OF KANSAS API NUMBER 15-051-30637-00,01 STATE CORPORATION COMMISSION K-A-R--82-3-117 130 S. Market, Room RECEIVED LEASE NAME Sunley ON WO Wichlta, KS 67202 WELL NUMBERR #2 MAR 2 5 2004 HOTICE: FILL OUT COMPLETELY TYPE OR PRINT 4950 Ftt. from S Section Line KCC WICHITA office within 30 days. 2970 Fit. from E Section Line Encore Operating Company LEASE OPERATOR SEC. 28 TWP. 14 RGE. 19 (E) or (F) COUNTY Ellis ADDRESS 1601 Blake St. Suite 500 Denver, CO. PHONE (303) 595-9251 OPERATORS LICENSE NO. 33069 Date Well (Completed Character of Well SWD 26412 Plugging Commenced March 8, 2004 Plugging Completed March 8, 2004 (OII, Gas, D&A, SWD, Input, Water Supply Well) The plugging proposal was approved on March 8, 2004 (etsb) by Pat Staab (XCC District Agent's Name). is ACO-1 filed? YES if not, is well log attached? Producing Formation Arbuckle Depth to Top Bottom T.D. 3925 Show depth and thickness of all water, oil and gas formations. OIL, GAS OR WATER RECORDS CASING RECORD Formation From Content To Size Put In Pullled out Surface Casing O. 206 none. Production Casing 0 3808 none Describe in detail the manner in which the well was plugged, indicating where the mud fiuld a placed and the method or methods used in introducing it into the hole. If cement or other pi were used, state the character of same and depth placed, from felet to feet each se Ran 2 3/8" tubing to 2103' circulated 110 sks of 60/40 POS with 10% Gel cement Ran 2 3/8" tubing to 2103, circulated 110 sks of 00/40 to with 300 pounds of hulls to surface, pulled tubing and pumped 155 sacks of cement with 150%'s of hulls down 4 1/2" casing at 400%'s pressure TSIP 150%'s Pumped 10 sks of cement with 50%'s of hulls down the 8 5/8" casing @ 400%'s. Cement in the 4 1/2 casing is from surface to 3875'. Plug down at 12:30 pm 3/8/04Name of Plugging Contractor Fischer Well Service Licronse No. 32332 Address Ellis, KS NAME OF PARTY RESPONSIBLE FOR PLUGGING FEES: Encore Operating Company STATE OF Colorado COUNTY OF _____Denver Roland Nyp (Employee of Ofperator) or (Operator) above-described well, being first duly sworn on oath, says: That I have knowledge of the facstatements, and matters becall contained and the log of the above-described well as filed t the same are true and correct, so help me God. (Signature) Koland (Address) 804 MAIN STOCKTON KS SUBSCRIBED AND SWORN TO before me this 18th day of Irene Notary Public My Commission Expires: 9-30-04

> RENE R. NYP MOTARY PUBLIC

STATE OF KANSAS

MY APPR. EXP. 2-30-04

Form CP