

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

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

API NUMBER 15-169-20,188-00-00

LEASE NAME Rundquist

WELL NUMBER 1

3630 Ft. from S Section Line

4950 Ft. from E Section Line

SEC. 2 TWP. 16 RGE. 3W (E) or (W)

COUNTY Saline

Date Well Completed 9-23-1982

Plugging Commenced 3-22-04

Plugging Completed 3-23-04

RECEIVED
APR 06 2004
KCC WICHITA

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

LEASE OPERATOR DON SIMS OIL

ADDRESS 2022 W. Rose Hill Rd. Lindsborg, Ks. 67456

PHONE# (785) 826-0371 OPERATORS LICENSE NO. 31478

Character of Well Oil

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

The plugging proposal was approved on 10-21-03 (date)

by Virgil Clothier (KCC District Agent's Name).

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

Producing Formation _____ Depth to Top _____ Bottom _____ T.D. 3547

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</u>				<u>8-5/8"</u>	<u>329'</u>	<u>None</u>
<u>Prod</u>				<u>5-1/2"</u>	<u>3445'</u>	<u>1800'</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 set.
Ran sand to 3100' with 5 sacks cement. Cut casing loose @1800', well started flowing into pit, pumped bottom with 30 sacks cement and displaced to 1800', pulled 5-1/2" to 400' and circulated 126 sacks cement to surface, pulled rest of casing & topped off with 14 sacks cement. 60/40 pos Plugging Complete. 4% gel.

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: Don Sims Oil

State of Kansas County of Rice, ss.

Mike Kelso (Employee of Operator) or (Operator) of 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 5th day of April, 2004

[Signature]
Notary Public

My Commission Expires:

