

STATE OF KANSAS
STATE CORPORATION COMMISSION
130 S. MARKET, ROOM 2078
WICHITA, KS 67202

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

TYPE OR PRINT
NOTICE: Fill out Completely
and return to coms. div.
office within 30 days.

API NUMBER 15-167-21 962 -00-00
LEASE NAME Parkhurst A
WELL NUMBER 1
1650 ft. from S Section Line
2970 ft. from E Section Line
SEC. 9 TWP. 14 RGE. 13 (E) of (W)
COUNTY Russell

Date Well Completed 1982 12-23-1982
Plugging Commenced 3/21/04
Plugging Completed 3/22/04

LEASE OPERATOR Starr F. Schlobohm
ADDRESS 47 Michawanic Road, #3D, Sanbornville, NH 03872-3787
PHONE # (603) 522-9760 OPERATORS LICENSE NO. 4952

Character of well oil
(Oil, Gas, D&A, SWD, input, Water Supply Well)

The plugging proposal was approved on 3/21/04
by Herb Deines KCC WICHITA (XCC District Agent's Name)

Is ACO-1 filed? yes if not, Is well log attached not available to us

Producing Formation Tarkio Sands Depth to Top 2,375' Bottom 2,405' T.D. 2490
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
				7"	511	none
				4 1/2	2474	1720

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 set

Sand at 2319, bail 4 sacks cement. Rip pipe at 1720, work free. Pull to 1400, pump 80 sacks cement w/3 hulls. Pull to 840, pump 25 sacks cement w/1 hulls. Pull to 520, pump 25 sacks cement w/1 hulls. Pull to 200, circulate cement with 20 sacks.

Name of Plugging Contractor Quality Well Service, Inc. License No. 31925
Address 401 West Main, Lyons, KS 67554

NAME OF PARTY RESPONSIBLE FOR PLUGGING FEES: Starr F. Schlobohm

STATE OF New Hampshire COUNTY OF Carroll, ss.

Starr F. Schlobohm (Employee of Operator) or (Operator) of 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 as filled that the same are true and correct, so help me God.

(Signature) Starr F. Schlobohm
(Address) 47 Michawanic Road, #3D Sanbornville, NH 03872-3787

SUBSCRIBED AND SWORN TO before me 21st day of April 2004

Jo Anne MacDonald Notary Public

My commission Expires: 8/14/07

JoAnne M. MacDonald
NOTARY PUBLIC OF NEW HAMPSHIRE
My Commission Expires Aug. 14, 2007

Form CP-4
Revised 05-88

ALLIED CEMENTING CO., INC.

P.O. BOX 31
 RUSSELL, KS 67665
 PH (785) 483-3887
 FAX (785) 483-5566
 FEDERAL TAX ID# ~~15-0000000~~

 * * * * *
 * I N V O I C E *
 * * * * *

Invoice Number: 092677

Invoice Date: 03/24/04

Sold Starr F. Schlobohm
 To: 47 Michwanic Rd. #3D
 Sanbornville, NH
 03872-3787

Cust I.D.....: Schl
 P.O. Number...: Parkhurst A-1
 P.O. Date.....: 03/24/04

Due Date.: 04/23/04
 Terms....: Net 30

Item I.D./Desc.	Qty. Used	Unit	Price	Net	TX
Common	90.00	SKS	7.1500	643.50	T
Pozmix	60.00	SKS	3.8000	228.00	T
Gel	10.00	SKS	10.0000	100.00	T
Hulls	5.00	SKS	18.0000	90.00	T
Handling	195.00	SKS	1.1500	224.25	T
Mileage min. chq.	1.00	MILE	125.0000	125.00	T
Plug	1.00	JOB	475.0000	475.00	T
Mileage pmp trk	5.00	MILE	3.5000	17.50	T

All Prices Are Net, Payable 30 Days Following
 Date of Invoice. 1 1/2% Charged Thereafter.
 If Account CURRENT take Discount of \$203.27
 ONLY if paid within 30 days from Invoice Date

Subtotal: 1903.25
 Tax.....: 129.42
 Payments: 0.00
 Total....: 2032.67

less → 203.27

P 1,829.40



7543
 3/30/04
 \$3,691.⁹³

RECEIVED
 APR 23 2004
 KCC WICHITA

ALLIED CEMENTING CO., INC.

16835

Federal Tax I.D.# ~~00-0000000~~

REMIT TO P.O. BOX 31
RUSSELL, KANSAS 67665

SERVICE POINT:

R

DATE <u>3-23-04</u>	SEC.	TWP.	RANGE	CALLED OUT	ON LOCATION	JOB START	JOB FINISH
LEASE <u>PAVILURST</u> WELL # <u>A-1</u>						COUNTY	STATE
LOCATION <u>I-70 & PIONEER RD IS 1/2E</u>						<u>RUSSELL</u>	<u>KS</u>
OLD OR NEW (Circle one)							

CONTRACTOR QUALITY

TYPE OF JOB PTA

HOLE SIZE _____ T.D. _____

CASING SIZE 4 1/2 DEPTH _____

TUBING SIZE _____ DEPTH _____

DRILL PIPE _____ DEPTH _____

TOOL _____ DEPTH _____

PRES. MAX _____ MINIMUM _____

MEAS. LINE _____ SHOE JOINT _____

CEMENT LEFT IN CSG. _____

PERFS. _____

DISPLACEMENT _____

EQUIPMENT

PUMP TRUCK CEMENTER MARK

346 HELPER MAVE

BULK TRUCK DRIVER CRAIG

378

BULK TRUCK DRIVER _____

REMARKS:

80 SK @ 1400 w/3 HULLS

25 SK @ 840 w/1 HULL

25 SK @ 520 w/1 HULL

200 SK @ 700 CTRC CEMENT

CHARGE TO: STAR

STREET _____

CITY _____ STATE _____ ZIP _____

To Allied Cementing Co., Inc.
You are hereby requested to rent cementing equipment and furnish cementer and helper to assist owner or contractor to do work as is listed. The above work was done to satisfaction and supervision of owner agent or contractor. I have read & understand the "TERMS AND CONDITIONS" listed on the reverse side.

SIGNATURE _____

OWNER _____

CEMENT AMOUNT ORDERED 175 60/40 1090 CTR

5 HULLS

USED 150 SK

COMMON	<u>90</u>	@	<u>7.15</u>	<u>643.50</u>
POZMIX	<u>60</u>	@	<u>3.80</u>	<u>228.00</u>
GEL	<u>10</u>	@	<u>10.00</u>	<u>100.00</u>
CHLORIDE		@		
ASC		@		
<u>Hulls</u>	<u>5</u>	@	<u>18.00</u>	<u>90.00</u>

RECEIVED

APR 23 2004

KCC-WICHITA

HANDLING	<u>195</u>	@	<u>1.15</u>	<u>224.25</u>
MILEAGE	<u>54</u>	@	<u>1.25</u>	<u>67.50</u>
TOTAL				<u>1410.75</u>

SERVICE

DEPTH OF JOB _____

PUMP TRUCK CHARGE _____ 475.00

EXTRA FOOTAGE _____ @ _____

MILEAGE 5 @ 3.50 17.50

TOTAL 492.50

PLUG & FLOAT EQUIPMENT

MANIFOLD _____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

TOTAL _____

TAX _____

TOTAL CHARGE _____

DISCOUNT _____ IF PAID IN 30 DAYS _____

PRINTED NAME _____