

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

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

API NUMBER 15-153-20,763-00-00

LEASE NAME Simminger A

WELL NUMBER 2-1025

2145 Ft. from S Section Line

1815 Ft. from E Section Line

SEC. 25 TWP. 1S RGE. 33 (X) or (W)

COUNTY Rawlins

Date Well Completed 11/6/1990

Plugging Commenced 11/6/90

Plugging Completed 11/7/90

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

LEASE OPERATOR Philpott Oil & Gas Co., Inc.

ADDRESS P.O.Box 450, Atwood, KS 67730

PHONE# (913) 626-3011 OPERATORS LICENSE NO. 3602

Character of Well D & A

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

The plugging proposal was approved on 11/6/1990 (date)

by Hays Office (KCC District Agent's Name).

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

Producing Formation _____ Depth to Top _____ Bottom _____ T.D. 4275

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 |
|-----------|---------|---------|------|--------|--------|------------|
| | | Surface | 275' | 8 5/8" | 275' | 0 |
| | | | | | | |
| | | | | | | |
| | | | | | | |

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.

200 sacks 60/40 poz w/6% gel.
1st plug @ 2875' w/25 sks, 2nd plug @ 2025' w/100 sks & 25# flo-seal,
3rd plug @ 325' w/40 sks, 4th plug @ 40' w/10 sks.
Rathole 15 sks, Mousehole 10 sks.

(If additional description is necessary, use BACK of this form.)

Name of Plugging Contractor Halliburton License No. _____

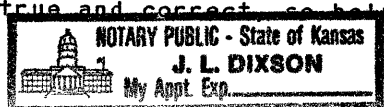
Address Oberlin, Kansas

NAME OF PARTY RESPONSIBLE FOR PLUGGING FEES: Philpott Oil & Gas Co., Inc.

STATE OF Kansas COUNTY OF Rawlins, ss.

Roger W. Philpott (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 filed that the same are true and correct, so help me God.



(Signature) [Signature]

(Address) P. O. Box 450, Atwood, KS 67730

SUBSCRIBED AND SWORN TO before me this 7th day of December, 19 90

12-10-90
J. L. Dixon
Notary Public

My Commission Expires: 10-23-94

CONSERVATION DIVISION
Wichita, Kansas