

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

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

API NUMBER 15-007-22802-00-00

LEASE NAME Bear Creek Ranch

WELL NUMBER 1-21

1900 Ft. from S Section Line

70 Ft. from E Section Line

SEC. 21 TWP. 31 RGE. 15 ~~XXXX~~(W)

COUNTY Barber County, Kansas

Date Well Completed _____

Plugging Commenced 03-01-04

Plugging Completed 03-01-04

RECEIVED

JUN 21 2004

KCC WICHITA

TYPE OR PRINT

NOTICE: Fill out completely
and return to Corp. Div.
office within 30 days.

LEASE OPERATOR Larson Operating Company

ADDRESS 562 W. Hwy 44 Olmitz, Kansas 67564-8561

PHONE#(620 653-7366) OPERATORS LICENSE NO. 5929 3842

Character of Well D&A

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

The plugging proposal was approved on 02-27-04 (date)

by Steve Middleton (KCC District Agent's Name).

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

Producing Formation _____ Depth to Top _____ Bottom _____ T.D. 4850'

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

Describe in detail the manner in which the well was plugged, indicating where the mud fluid placed and the method or methods used in introducing it into the hole. If cement or other pl were used, state the character of same and depth placed, from ___ feet to ___ feet each se

1st Plug: 800' w/50 sacks cement through drillpipe

2nd Plug: 330' w/50

3rd plug: 40' w/10 R/15

Name of Plugging Contractor Duke Drilling Co., Inc. License No. 5929

Address PO Box 823 Great Bend, Kansas 67530

NAME OF PARTY RESPONSIBLE FOR PLUGGING FEES: Larson Operating Company

STATE OF KANSAS COUNTY OF BARTON, ss.

THOMAS LARSON

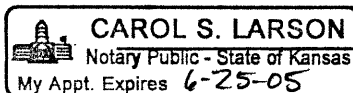
(Employee of Operator) or (Operator)

above-described well, being first duly sworn on oath, says: That I have knowledge of the fact statements, and matters herein contained and the log of the above-described well as filed th the same are true and correct, so help me God.

(Signature) Thomas Larson

(Address) 562 W. HWY 44 OLMITZ, KS

SUBSCRIBED AND SWORN TO before me this 17th day of June, 19 2004

 CAROL S. LARSON
Notary Public - State of Kansas
My Appt. Expires 6-25-05

Carol S. Larson
Notary Public

My Commission Expires:

USE ONLY ONE SIDE OF EACH FORM