WELL PLUGGING RECORD STATE OF KANSAS API NUMBER <u>15-147-20,</u>241 -00-00 STATE CORPORATION COMMISSION K.A.R.-82-3-177 200 Colorado Derby Building Wichita, Kansas 67202 LEASE NAME Grau B TYPE OR PRINT WELL NUMBER 1 NOTICE: Fill out completely and return to Cons. Div. 330 Ft. from S Section Line office within 30 days. 3630 Ft. from E Section Line LEASE OPERATOR R.P. Nixon Operations, Inc. SEC. 35 TWP. 3S RGE. 19W (E)or(W) ADDRESS 207 West 12th Street Havs, KS 67601 COUNTY Phillips PHONE #(913) 628-3834 OPERATORS LICENSE NO. 5252 Date Well Completed 8-25-78 Plugging Commenced 10-26-94 Character of Well Oil (Oil, Gas, D&A, SWD. Input, Water Supply Well) Plugging Completed 10-26-94 The plugging proposal was approved on 10-26-94 (date) (KCC District Agent's Name). by Carl Goodrow Is ACO-1 Filed? _ves ____ If not, is well log attached?_____ Producing Formation <u>L/KC</u> Depth to Top <u>3198'</u> Bottom <u>3418'</u> T.D. <u>3424'</u> Show depth and thickness of all water, oil and gas formations. OIL, GAS, OR WATER RECORDS CASING RECORD То Formation Content From Size Pulled out Put in 8%" 212' None 45" 3422' None 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. Pumped down 4½" casing with 250 sx 60/40 Poz, 10% gel, w/500# of hulls. ISIP was 1000#. Tied on to 4½" backside and pumped 25 sx of same blend at 300#. (If additional description is necessary, use BACK of this form.) Name of Plugging Contractor_Jay-Lan Corp. License No._5128 Address 207 West 12th St. Hays, KS 67601 NAME OF PARTY RESPONSIBLE FOR PLUGGING FEES: R.P. Nixon Oper. Inc. STATE OF Kansas COUNTY OF Ellis ,ss. <u>Dan Nixon</u> (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)_ (Address) 207 W. 12th Havs, KS 67604

SUBSCRIBED AND SWORN TO before me this 30th day of November

My Commission Expires: 5-

KOTARY PUBLIC - State of Kansas ROXIE VONLINTEL ⊒ My Appt. Exp. _