WELL PLUGGING RECORD STATE OF KANSAS API NUMBER 15-147-01,001 -00-0 STATE CORPORATION COMMISSION K.A.R.-82-3-177 20[®] Colorado Derby Building LEASE NAME Grau B Wichita, Kansas 67202 TYPE OR PRINT WELL NUMBER 4 NOTICE: Fill out completely 2310 Ft. from S Section Line and return to Cons. Div. office within 30 days. 2970 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 Hays, KS 67601 COUNTY Phillips PHONE #(913) 628-3834 OPERATORS LICENSE NO. 5252 Date Well Completed 9-26-84 Character of Well Oil Plugging Commenced 10-26-94 (Oil, Gas, D&A, SWD, Input, Water Supply Well) Plugging Completed 10-26-94 The plugging proposal was approved on 10-26-94 (date) by Carl Goodrow _____(KCC District Agent's Name). Is ACO-1 Filed? ves If not, is well log attached? Producing Formation L/KC Depth to Top 3218' Bottom 3420' T.D. 3616' Show depth and thickness of all water, oil and gas formations. OIL, GAS, OR WATER RECORDS CASING RECORD Formation Content From То Size Put in Pulled out 8%" 1597' None 41/5" 3597' 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 w/1775 sx of 60/40 Poz., 10% gel & 500# hulls. ISIP was 100#. Tied onto 4½" backside and pumped 25 sx of same blend. (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 <u>Dan Nixon</u> (<u>Employee of Operator</u>) 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)

SUBSCRIBED AND SWORN TO before me this 30th day of

(Address) 207 W. 12th

My Commission Expires:

COTARY PUBLIC - State of Kansas ROXIE VONLINTEL My Appt. Exp.

Form CP-4 Revised 05-88