

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

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

15-153-30011-00-01

API NUMBER _____

LEASE NAME Wilhelm Unit

WELL NUMBER 1

660 Ft. from S Section Line

4620 Ft. from E Section Line

SEC. 16 TWP. 1S RGE. 32 (E) or (W) (W)

COUNTY Rawlins

Date Well Completed 3/11/60

Plugging Commenced 8/14/97 3:30pm

Plugging Completed 8/14/97 4:45pm

RECEIVED
CORPORATION DIVISION
OCT 13 1997
10-3-1997

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 Injection

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

The plugging proposal was approved on 8/14/97 (date)

by Carl Goodrow (KCC District Agent's Name).

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

Producing Formation LKC Depth to Top 3995 Bottom 4145 T.D. 4170

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
		GL	372	8 5/8	372	0
		GL	4236	5 1/2	4236	480

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.
Mixed 90 sacks 60/40 poz w/10% gell. Pumped down plug. Shot off casing at 480 ft.
Pulled and laid down 5 joints. Pumped plug, circulated cement to surface. Pulled and
laid down 10 joints. Topped off with 10 sacks cement.

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

Name of Plugging Contractor Northwest Well Service License No. 31664

Address 17509 Road 14, Ft. Morgan, Co 80201

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

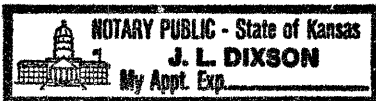
STATE OF Kansas COUNTY OF Rawlins, ss.

Roger W. Philpott, President (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) Roger W. Philpott

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



SUBSCRIBED AND SWORN TO before me this 22nd day of Sept, 19 97

J. L. Dixon
Notary Public

My Commission Expires: 10-23-98