

STATE OF KANSAS
STATE CORPORATION COMMISSION
130 S. Market, Room 2078
Wichita, KS 67202

WELL PLUGGING RECORD
K.A.R.-62-3-117

API NUMBER 15-055-20189-00-00

LEASE NAME Landeraf B1-15

WELL NUMBER B1-15

2640 Ft. from N Section Line

1320 Ft. from E Section Line

SEC. 15 TWP. 21 RGE. 32W(E) or (W)

COUNTY Finney

Date Well Completed 07/10/75

Plugging Commenced 05/13/04

Plugging Completed 05/13/04

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

LEASE OPERATOR Chesapeake Operating, Inc.

ADDRESS P. O. Box 18496, Oklahoma City, OK 73154-0496

PHONE# (405) 848-8000 OPERATORS LICENSE NO. 32334

Character of Well Gas

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

The plugging proposal was approved on 04/19/04 (date)

by David Williams (KCC District Agent's Name).

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

Producing Formation Upr Krider Depth to Top 2692 Bottom 2702' T.D. 2774'

Show depth and thickness of all water, oil and gas formations.

2775 *KCC
Ben
8-31-04*

OIL, GAS OR WATER RECORDS

CASING RECORD

Formation	Content	From	To	Size	Put in	Pulled out
				8-5/8	390	
				4-1/2	2774	

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 plug were used, state the character of same and depth placed, from feet to feet each set: MIRU Allid, pump down 4-1/2" csg w/400# hulls w/125 sx cmt, max PST 1500#, ST @1500#, tie onto 8-5/8" annulus, pump 100 sx cmt, max PST 200#, ST @200#, RDMO Allid
Cut off casing - weld cap

Name of Plugging Contractor Allied Cementing Co., Inc. License No. _____

Address P. O. Box 31, Russell, KS 67665 (785)483-2626

NAME OF PARTY RESPONSIBLE FOR PLUGGING FEES: Chesapeake Operating, Inc.

STATE OF Oklahoma COUNTY OF Oklahoma, ss.

Jim Reisch

(Employee of Operator) or (Operator) o

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 the the same are true and correct, so help me God.

(Signature) Barbara J. Hale for Jim Reisch
Jim Reisch

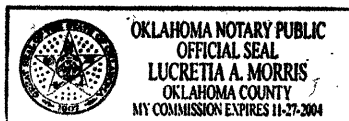
(Address) P.O. Box 18496, Okla. City, OK

73154-0496

SUBSCRIBED AND SWORN TO before me this 26th day of August, 2004

Lucretia A. Morris #00018352
Notary Public

My Commission Expires: 11/27/04



Form CP-4
Revised 05-88

RECEIVED
AUG 30 2004
KCC WICHITA

ALLIED CEMENTING CO., INC.

5937

Federal Tax I.D.# [REDACTED]

REMIT TO P.O. BOX 31
RUSSELL, KANSAS 67665

SERVICE POINT:

Dickley

DATE <u>5-13-04</u>	SEC. <u>15</u>	TWP. <u>21</u>	RANGE <u>32</u>	CALLED OUT	ON LOCATION	JOB START <u>12:00 PM</u>	JOB FINISH <u>1:00 PM</u>
LEASE <u>land of '93'</u>	WELL # <u>1-14</u>	LOCATION <u>Gen 483 3E 2 N 1/2</u>				COUNTY <u>Linney</u>	STATE <u>Ks</u>
OLD OR NEW (Circle one)				<u>1/2 1/4 1/4</u>			

CONTRACTOR _____ OWNER Spine

TYPE OF JOB plug old hole

HOLE SIZE _____ T.D. _____

CASING SIZE 4 1/2 DEPTH _____

TUBING SIZE _____ DEPTH _____

DRILL PIPE _____ DEPTH _____

TOOL _____ DEPTH _____

PRES. MAX _____ MINIMUM _____

MEAS. LINE _____ SHOE JOINT _____

CEMENT LEFT IN CSG. _____

PERFS. 2 692 - 2 707

DISPLACEMENT _____

CEMENT AMOUNT ORDERED 225 sks 60/40 Poz 6 1/2 6d 400# Hulls

COMMON	<u>135 sks</u>	@	<u>8.85</u>	<u>1194.75</u>
POZMIX	<u>90 sks</u>	@	<u>4.00</u>	<u>360.00</u>
GEL	<u>12 sks</u>	@	<u>11.00</u>	<u>132.00</u>
CHLORIDE		@		
		@		
<u>Hulls</u>	<u>45 sks</u>	@	<u>20.00</u>	<u>900.00</u>
		@		
		@		
		@		
HANDLING	<u>241 sks</u>	@	<u>1.25</u>	<u>301.25</u>
MILEAGE	<u>57 sk/mile</u>			<u>819.40</u>

TOTAL 2887.40

EQUIPMENT

PUMP TRUCK CEMENTER Denn

573-281 HELPER Andrew May

BULK TRUCK

361 DRIVER Larry

BULK TRUCK

218 DRIVER Larry

REMARKS:

Pump down 4 1/2 csg 125 sks 4 1/4
Hulls Max press 1500# shut in 1000#
pump down 8 1/2 100 sks Max press
200# shut in 1000#

Thank you

SERVICE

DEPTH OF JOB _____

PUMP TRUCK CHARGE _____ 250.00

EXTRA FOOTAGE @ _____

MILEAGE 68 miles @ 4.00 N/C

PLUG @ _____

@ _____

@ _____

RECEIVED

TOTAL 250.00

AUG 30 2004

FLOAT EQUIPMENT

KCC WICHITA

CHARGE TO: Chesapeake Operating

STREET _____

CITY _____ STATE _____ ZIP _____

To Allied Cementing Co., Inc.

You are hereby requested to rent cementing equipment and furnish cementer and helper to assist owner or contractor to do work as is listed. The above work was done to satisfaction and supervision of owner agent or contractor. I have read & understand the "TERMS AND CONDITIONS" listed on the reverse side.

SIGNATURE Dennis Frick

TAX _____

TOTAL CHARGE _____

DISCOUNT _____ IF PAID IN 30 DAYS

Dennis Frick
 PRINTED NAME