

Notice: Fill out COMPLETELY and return to Conservation Division at the address below within 30 days from plugging date.

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION
WELL PLUGGING RECORD
K.A.R. 82-3-117

Form CP-4
September 2003
Type or Print on this Form
Form must be Signed
All blanks must be Filled

KCC WICHITA 15-185-0175600-00
API Number: 15-185-0175600-00

Lease Operator: Globe Operating, Inc.
Address: P.O. Box 12 Great Bend, Kansas 67530
Phone: (620) 792-7607 Operator License #: 6170
Type of Well: Oil Docket #: _____
(Oil, Gas D&A, SWD, ENHR, Water Supply Well, Cathodic, Other) (If SWD or ENHR)
The plugging proposal was approved on: _____ (Date)
by: Richard Lacey (KCC District Agent's Name)
Is ACO-1 filed? Yes No If not, is well log attached? Yes No
Producing Formation(s): List All (If needed attach another sheet)

Depth to Top: _____ Bottom: _____ T.D. _____

Depth to Top: _____ Bottom: _____ T.D. _____

Depth to Top: _____ Bottom: _____ T.D. 3737'

Lease Name: Morrison
Well Number: 5
Spot Location (QQQQ): _____ - S/2 - S/2 - SE
660 Feet from North / South Section Line
1320 Feet from East / West Section Line
Sec. 28 Twp. 21 S. R. 13W East West
County: Stafford
Date Well Completed: 3-7-52
Plugging Commenced: 8-24-04
Plugging Completed: 8-25-04

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

Oil, Gas or Water Records		Casing Record (Surface Conductor & Production)				
Formation	Content	From	To	Size	Put In	Pulled Out
				8-5/8"	270'	None
				5-1/2"	3731'	None

Describe in detail the manner in which the well is 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 depth placed, from _____ feet to _____ feet each set.

Bridge plug @2800', dumped 5 sacks cement on top. Cut hole in 5-1/2" casing @700', ran 2" tubing to 700', circulated 300 sacks 60/40 pos, 6% gel up 5-1/2" casing and around 8-5/8" surface. Plugging Complete.

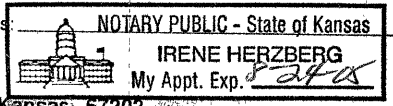
Name of Plugging Contractor: Mike's Testing & Salvage, Inc. License #: 31529
Address: P.O. Box 467 Chase, Kansas 67524
Name of Party Responsible for Plugging Fees: Globe Operating, Inc.
State of Kansas County, Rice, ss.

Mike Kelso (Employee of Operator) or (Operator) on 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 is as filed, and the same are true and correct, so help me God.

(Signature) Mike Kelso
(Address) P.O. Box 467 Chase, Kansas 67524

SUBSCRIBED and SWORN TO before me this 2nd day of September, 2004

Irene Herzberg My Commission Expires _____
Notary Public



Mail to: KCC - Conservation Division, 130 S. Market - Room 2078, Wichita, Kansas 67202

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