

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 15-051-25,337-00-00  
LEASE NAME Dog Pound # 1-8  
WELL NUMBER 1-8

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

1850 Ft. from S Section Line  
2970 Ft. from E Section Line  
SEC. 8 TWP. 14S RGE. 17W (S) or (W)

LEASE OPERATOR HERTEL OIL COMPANY, LLC  
ADDRESS 704 East 12th Street Hays, KS 67601  
PHONE (785) 628-2445 OPERATORS LICENSE NO. 8729

COUNTY Ellis

Character of Well D & A

Date Well Completed 8/15/04

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

Plugging Commenced 10:30PM 8/14/04

Plugging Completed 12:45AM 8/15/04

The plugging proposal was approved on 8/14/04 (date)

by Bruce Bayse (KCC District Agent's Name).

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

Producing Formation None Depth to Top \_\_\_\_\_ Bottom \_\_\_\_\_ T.O. 3600'

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
		Surface	214	8 5/8	214.16	None

RECEIVED  
OCT 13 2004  
KCC WICHITA

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:  
1st Plug @ 1240'w/25sks 10sks In Mouse Hole Circulated 1st Plug 15 Minutes W/48Vis Mud  
2nd Plug @ 600'w/80sks 15sks In Rat Hole Plugs displaced with mud  
3rd Plug @ 260'w/40sks Total 180sks 60/40Poz 6%Gel W/1#CF/sk By Allied Cementing  
4th Plug @ 40'w/10sks Completed @ 12:45AM 8/15/04

Name of Plugging Contractor Discovery Drilling Co., Inc. License No. 31548

Address P.O. Box 763 Hays, KS 67601

NAME OF PARTY RESPONSIBLE FOR PLUGGING FEES: HERTEL OIL COMPANY, LLC

STATE OF Kansas COUNTY OF Ellis, ss.

Hertel Oil Co., LLC

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

(Signature) \_\_\_\_\_

(Address) \_\_\_\_\_

SUBSCRIBED AND SWORN TO before me this 11th day of October, 2004

Arlene M. Brungardt  
Notary Public

My Commission Expires: 3-20-2005

Form CP-4  
Revised 05-88



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