

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

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

API NUMBER 15-039-20,409-00-00

LEASE NAME Petracek

WELL NUMBER 2

1650 Ft. from (W) Section Line

700 Ft. from (E) Section Line

SEC. 23 TWP. 4S RGE. 27 (E) or (W)

COUNTY Decatur

Date Well Completed 4/16/78

Plugging Commenced 11/7/01

Plugging Completed 11/7/01

JAN 08 2002
1-8-2002
CONSERVATION DIVISION

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

LEASE OPERATOR Ritchie Exploration, Inc.

ADDRESS P.O. Box 783188, Wichita, KS 67278-3188

PHONE# (316) 691-9500 OPERATORS LICENSE NO. 4767

Character of Well OIL

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

The plugging proposal was approved on November 7, 2001 (date)

by Dennis Hamel (KCC District Agent's Name).

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

Producing Formation Lansing/KC Depth to Top 3482' Bottom 3676' T.D. 3706

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
Lansing/KC	Oil/Brine	3482'	3676'	4.5"	3692'	0/0
				8.625"	245'	0

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.

Plug 4 1/2" casing with 285 sacks of 60/40 Poz with 8% gel and 400 pounds of hulls. Maximum pressure 300 PSI, shut in at 100 PSI. Plug annulus with 30 sacks of 60/40 Poz with 8% gel, and 100 pounds of hulls. Maximum pressure 300 PSI, shut in at 150 PSI. Plugging completed.
(If additional description is necessary, use BACK of this form.)

Name of Plugging Contractor Allied Cementing, Inc. License No. 4767

Address P.O. Box 31, Russell, KS 67665-0031

NAME OF PARTY RESPONSIBLE FOR PLUGGING FEES: Ritchie Exploration, Inc.

STATE OF Kansas COUNTY OF Sedgwick, ss.

John C. Niernberger (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) [Signature]

(Address) P.O. Box 783188, Wichita, KS 67278-3188

SUBSCRIBED AND SWORN TO before me this 7th day of January, 2002

My Commission Expires: _____

KAREN HOPPER
Notary Public - State of Kansas
My Appt. Expires 10/27/03