

API NUMBER 15-137-20087-00-00

LEASE NAME Schaben #2 - SWD

WELL NUMBER 2

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

4950 Ft. from SN Line of Section (circle one)

2970 Ft. from EW Line of Section (circle one)

EASE OPERATOR OZARK ENTERPRISES

SPOT LOCATION NE - NE - NW

ADDRESS P.O. BOX 128

SEC. 22 TWP. 5 S. RGE 23 (E) or (W)

CITY, STATE, ZIP GAINESVILLE, MO 65655

COUNTY NORTON

PHONE# (417) 679-3550 OPERATORS LICENSE NO. None

Date Well Completed 7-18-73

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

Date Plugging Commenced 1-14-97

Date Plugging Completed 1-14-97

The plugging proposal was approved on 7-13-97 (date)

by DENNIS HAMEL (KCC District Agent's Name)

Is ACO-1 filed? no If not, is well log attached? yes

Producing Formation(s) DISPOSAL Depth to Top 1300 Bottom 1750 T.D. 3700'

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	PULL OUT
SURFACE	8 5/8"	SURFACE	215'	8 5/8"	215'	0
CERDAR HILLS	SAND	1300	1750	5 1/2"	1876'	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.

mixed 135 SK'S 60-40 Poz mix w/ 300 # HULLS
Pumped At 750 #, Shot in 1000 #, Cement TO SURFACE

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

Name of Plugging Contractor Allied Cementing

License No. _____

Address Russell, KS

NAME OF PARTY RESPONSIBLE FOR PLUGGING FEES: OZARK ENTERPRISES

STATE OF Missouri COUNTY OF OZARK, ss.

Stephen P. Morrison (Employee of Operator or (Operator) of above-described well, being first duty

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) Stephen P. Morrison

(Address) Seneca, MO

SUBSCRIBED AND SWORN TO before me this 20th day of January, 19 97

GAY STRONG
 Notary Public

My Commission Expires: 10/18/98 GAY STRONG

