

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

WELL PLUGGING RECORD
K.A.R.-82-3-177

API NUMBER 15-137-20,235-0000

LEASE NAME Boyd

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

WELL NUMBER 1

4290 Ft. from S Section Line

2310 Ft. from E Section Line

LEASE OPERATOR Double Eagle Oil Exploration, Inc

SEC. 12 TWP. 5S RGE. 22W (E)or(W)

ADDRESS 800 West 47th Street Kansas City, MO 67560

COUNTY Norton

PHONE #(816) 531-0202 OPERATORS LICENSE NO. 6009

Date Well Completed 7/12/81

Character of Well oil

Plugging Commenced 11/19/94

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

Plugging Completed 11/19/94

The plugging proposal was approved on 11/19/94 (date)

by Carl Goodrow (KCC District Agent's Name).

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

Producing Formation L/KC & Reagan Depth to Top 3231' Bottom 3510' T.D. 3510'

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
				8 5/8"	185'	None
				4 1/2"	3509'	None

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.
Sanded back TD-2921'. Ran tubing to 1600', pumped 50 sx 60/40 Poz, 10% gel, 200# hulls. Pulled to 600', pumped 50 sx same blend, 200# hulls, cement circulated. Pulled all tubing, pumped down 4 1/2" w/100 sx same blend, max pressure 800#. Pumped down 4 1/2" annulus w/50 sx same blend, max presure 300#.

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

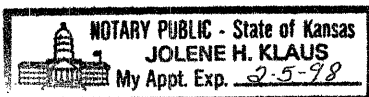
Name of Plugging Contractor Jay-Lan Corp. License No. 5128

Address 207 West 12th Hays, KS 67601

NAME OF PARTY RESPONSIBLE FOR PLUGGING FEES: R.P. Nixon Operations, Inc.

STATE OF Kansas COUNTY OF Ellis, ss.

Dan Nixon, president, R.P. Nixon Oper., Inc. (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) [Handwritten Signature]

(Address) 207 West 12th Hays, KS 67601

SUBSCRIBED AND SWORN TO before me this 4th day of January, 19 95

Jolene H. Klaus
Notary Public

My Commission Expires: 2-5-98

RECEIVED
CORPORATION COMMISSION
JAN 05 1995
1-5-95
Form CP-4
Revised 05-88