

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

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

15-039-00047-00-00

API NUMBER _____

LEASE NAME Hardesty

WELL NUMBER 1

4620 Ft. from S Section Line

330 Ft. from E Section Line

SEC. 22 TWP. 5 RGE. 27 (S) or (W)

COUNTY Decatur

Date Well Completed 2-4-52

Plugging Commenced Dec 6 1990

Plugging Completed Dec 6 1990

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

LEASE OPERATOR Jason Oil

ADDRESS Box 701

PHONE# (913) 493-4204 OPERATORS LICENSE NO. 6622

Character of Well abd

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

The plugging proposal was approved on 7-30-90 (date)

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

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

Producing Formation LKC Depth to Top 3642 Bottom 3814 T.D. 3823

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
<u>Toronto</u>		<u>3605</u>	<u>19</u>	<u>10 3/4</u>	<u>269</u>	<u>None</u>
<u>Lansing</u>		<u>3644</u>	<u>384</u>	<u>5 1/2</u>	<u>3827</u>	<u>None</u>
<u>Marmaton</u>		<u>3836</u>	<u>46</u>			
<u>Arb</u>		<u>4054</u>	<u>95</u>			

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.
Pumped in casing with 255 sks cement plus pumped in 225 sks cement with 3/16 f.c. on 400 lb hulls mixed in cement 200 lb Max SI 300 Pumped in 10 3/4 with 50 sks 3/16 f.c. 200 lb hulls Max 200 lbs SI 75 lb.

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

Name of Plugging Contractor Jason Oil License No. 6622

Address Box 701 Russell Kans

NAME OF PARTY RESPONSIBLE FOR PLUGGING FEES: James L. Schoenberger

STATE OF Kansas COUNTY OF Russell, ss.

James L. Schoenberger, Operator (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) James L. Schoenberger

(Address) P. O. Box 701, Russell, KS. 67665

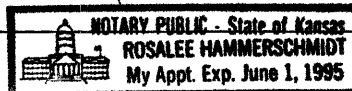
RECEIVED

STATE CORPORATION COMMISSION SUBSCRIBED AND SWORN TO before me this 5th day of June, 1991

JUN 6 1991

CONSERVATION DIVISION
 Wichita, Kansas

My Commission Expires: _____



Notary Public

Form CP-4
 Revised 05-88