Notice: Fill out COMPLETERECENED

And return to Conservation Division at the address below within 30 days from plugging date.

Notice: Fill out COMPLETERECENED

KANSAS CORPORATION COMMISSIO OIL & GAS CONSERVATION DIVISION

KANSAS CORPORATION COMMISSION

Form CP-4 September 2003 Type or Print on this Form Form must be Signed All blanks must be Filled

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

Lease Operator: Don Karst Well Service, Inc					API Number: 15 - 153-20335 - 00 - 00	
Address: P.O. Box 863, Russell, KS 67665					Lease Name: Briney B	
Phone: (785) 483 - 4142 Operator License #: 6600					Well Number:	
Type of Well: (Oil, Gas D&A, SWD, ENHR, Water Supply Well, Cathodic, Other) Oil (If SWD or ENHR)					Spot Location (QQQQ): C - NW - SE	
The plugging proposal was approved on: 9-17-03 (Date)					Teet from East / West Section Line Sec. 31 Twp. 5 S. R. 36 East West County: Rawlins	
by: Herb Deines (KCC District Agent's Name)						
Is ACO-1 filed? Yes No If not, is well log attached? Yes No						
Producing Formation(s): List All (If needed attach another sheet)					Date Well Completed: Late 1970's	
NA Depth to Top: Bottom: T.D					Plugging Commenced: 9-23-03	
Depth to Top: Bottom: T.D				D	Plugging Commenced: 9-23-03	
Depth to Top: Bottom: T.D				Plugging Completed: 9-23-03		
Show depth and thickness	of all water, oil and gas	formations.				<u> </u>
Oil, Gas or Water Records Casing Record (Surface Conductor & Production)						
Formation	Content	From	То	Size	Put In	Pulled Out
				8 5/8"	400	none
				4 1/2"	4762	none
				* ** ,2 *	< 2.1 (COSC - M.) (27) Proces	
	694. Junk in hole (@4100'. Co	nnected to	4 1/2" produ	ection casing. Pur	mped 250 sx 60/40 poz w/10%
	*		iut in press	ure 250#. C	onnected to 6 5/6	B" casing and pumped 50 sx.
Maximum 250# and	shut in pressure 5	0#.				
Name of Plugging Contractor: Cla-Mar Oil Company License						99
Address: P.O. Box 119	97, Hays, KS 6760	1				
Name of Party Responsible	e for Plugging Fees: Cl	a-Mar Oil C	ompany, P	.O. Box 119	7, Hays, KS 6760)
State of KS	County, _	Ellis		_ , ss.		
Jim D. Clark			agent	_ (Employee of	Operator) or (Operator)	on above-described well, being first duly
· •	,	facts statemen	ts, and matters	s herein contain	ed, and the log of the	above-described well is as filed, and the
	LIC - State of Kansas	(Signature)	Man V	box 1/9	2 Hags.	KS 67601
	SUBSCRIBED and S	WORN TO bel	fore me this _c	29 day of	Sept	<u>, 2003</u>
	- Si	Notary Pub	ctarie	ander to a design to commend the commend of the commendation of th	Commission Expires:	3126105
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