

Notice: Fill out COMPLETELY and return to Conservation Division at the address below within 60 days from plugging date.

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION
WELL PLUGGING RECORD
K.A.R. 82-3-117

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

Lease Operator: Falcon Exploration, Inc.
Address: 155 N. Market, Ste 1020; Wichita, KS 67202
Phone: (316) 262-1378 Operator License #: 5316
Type of Well: Oil Docket #: _____
(Oil, Gas D&A, SWD, ENHR, Water Supply Well, Cathodic, Other) (If SWD or ENHR)
The plugging proposal was approved on: 05/26/04 (Date)
by: David P. Williams (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)

Depth to Top: _____ Bottom: _____ T.D. _____

Depth to Top: _____ Bottom: _____ T.D. _____

Depth to Top: _____ Bottom: _____ T.D. _____

API Number: 15-155-21269-00-00
Lease Name: Trembley
Well Number: 1
Spot Location (QQQQ): _____ - W2 - SW - SE
660-620 Feet from North / South Section Line
2280 Feet from East / West Section Line
Sec. 33 Twp. 25 S. R. 8 East West
County: Reno
Date Well Completed: 09/15/93
Plugging Commenced: 10-22-04
Plugging Completed: 10-25-04

KCC
BEA
1-14-05
RBDMS
CP-1
CP 2/3

Show depth and thickness of all water, oil and gas formations.

Oil, Gas or Water Records		Casing Record (Surface Conductor & Production)				
Formation	Content	From	To	Size	Put In	Pulled Out
Elmont	Oil & Gas	0	338'	8 5/8	338	0
		0	4261'	5 1/2	4267	1860

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Describe in detail the manner in which the well is 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 depth placed from (bottom), to (top) for each plug set.

Bailed 5 sacks, ripped 1860', pulled to 1300', pumped 35 sacks, pulled to 800', pumped 35 sacks, pulled to 350', pumped 100 sacks, pulled rest of pipe

Name of Plugging Contractor: Quality Well Service, Inc. License #: 31925

Address: 401 West Main, Lyons, Ks 67554

Name of Party Responsible for Plugging Fees: Falcon Exploration, Inc.

State of Kansas County, Sedgwick, ss.

Ron Schraeder (Employee of Operator) or (Operator) on 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 is as filed, and the same are true and correct, so help me God.

(Signature) Rosann M Schipper
(Address) 155 N. Market, Ste 1020, Wichita, KS 67202

SUBSCRIBED and SWORN TO before me this 12 day of January, 20 05

Rosann M Schipper My Commission Expires: 9/28/07
Notary Public

Mail to: KCC - Conservation Division, 130 S. Market - Room 2078, Wichita, Kansas 67202



BEA

*** ALLIED CEMENTING CO., INC.**

PO. BOX 31
 RUSSELL, KS 67665
 PH (785) 483-3887
 FAX (785) 483-5566
 FEDERAL TAX ID# 48-0727860

 * I N V O I C E *

Invoice Number: 094915

Invoice Date: 10/27/04

Sold Falcon Exploration, Inc.
 To: P. O. Box 551
 Russell, KS
 67665

502-69 hw

Cust I.D.....: Falc
 P.O. Number...: Trembly #1
 P.O. Date.....: 10/27/04
 Due Date.: 11/26/04
 Terms.....: Net 30

Item I.D./Desc.	Qty	Used	Unit	Price	Net	TX
Common	102.00		SKS	7.8500	800.70	T
Pozmix	68.00		SKS	4.1000	278.80	T
Gel	6.00		SKS	11.0000	66.00	T
Hulls	3.00		SKS	20.0000	60.00	T
Handling	210.00		SKS	1.3500	283.50	T
Mileage (35)	35.00		MILE	10.5000	367.50	T
210 sks \$.05 per sk per mi						
Plug	1.00		JOB	525.0000	525.00	T
Mileage pmp trk	35.00		MILE	4.0000	140.00	T

All Prices Are Net, Payable 30 Days Following
 Date of Invoice. 1 1/2% Charged Thereafter.
 If Account CURRENT take Discount of \$252.15
 ONLY if paid within 30 days from Invoice Date

Subtotal: 2521.50
 Tax.....: 158.86
 Payments: 0.00
 Total....: 2680.36

1295
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ALLIED CEMENTING CO., INC. 20277

Federal Tax I.D.# ~~XXXXXXXXXX~~

REMIT TO P.O. BOX 31
RUSSELL, KANSAS 67665

SERVICE POINT:
M.L.

DATE <u>10-25-04</u>	SEC. <u>33</u>	TWP. <u>25</u>	RANGE <u>8</u>	CALLED OUT <u>12:00 pm</u>	ON LOCATION <u>1:00 pm</u>	JOB START <u>1:45 pm</u>	JOB FINISH <u>3:45 pm</u>
LEASE <u>Tremby</u>	WELL # <u>1</u>	LOCATION <u>14 + Parallell Rd. 3/4 west</u>			COUNTY <u>Reno</u>	STATE <u>KS</u>	
OLD OR NEW (Circle one)			<u>north into</u>				

CONTRACTOR Quality Well Service
 TYPE OF JOB ohp
 HOLE SIZE 7 7/8" T.D. 1300'
 CASING SIZE 5 1/2" 11.60 DEPTH 1300'
 TUBING SIZE _____ DEPTH _____
 DRILL PIPE 4 1/2" DEPTH _____
 TOOL _____ DEPTH _____
 PRES. MAX 100 MINIMUM 50
 MEAS. LINE _____ SHOE JOINT _____
 CEMENT LEFT IN CSG. _____
 PERFS. _____
 DISPLACEMENT _____

OWNER Falcon Exploration

CEMENT
 AMOUNT ORDERED 200 x 60:40:4
300 # hulls
(Used 170 #)

COMMON	<u>102 A</u>	@	<u>7.85</u>	<u>800.70</u>
POZMIX	<u>68</u>	@	<u>4.10</u>	<u>278.80</u>
GEL	<u>6</u>	@	<u>11.00</u>	<u>66.00</u>
CHLORIDE		@		
ASC		@		
<u>Hulls</u>	<u>3</u>	@	<u>20.00</u>	<u>60.00</u>

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HANDLING	<u>210</u>	@	<u>1.35</u>	<u>283.50</u>
MILEAGE	<u>35 x 210 x .05</u>			<u>367.50</u>
TOTAL				<u>1856.50</u>

EQUIPMENT

PUMP TRUCK CEMENTER Mike Pucker
 # 372 HELPER Darin Franklin
 BULK TRUCK
 # 364 DRIVER Dennis Custerberg
 BULK TRUCK
 # _____ DRIVER _____

REMARKS:
1st Plug: 1300' load hole mix 35sx
60:40:4 with 150# hulls Disp.
2nd Plug: 800' load hole mix 35sx
60:40:4 with 150# hulls, Displace,
3rd Plug: 350' load hole mix 100sx 60:40:
4 Circ. Cement to Surface.

CHARGE TO: Falcon Exploration
 STREET _____
 CITY _____ STATE _____ ZIP _____

SERVICE

DEPTH OF JOB	<u>1300'</u>			
PUMP TRUCK CHARGE			<u>525.00</u>	
EXTRA FOOTAGE		@		
MILEAGE	<u>35</u>	@	<u>4.00 140.00</u>	
MANIFOLD		@		
		@		
		@		
TOTAL				<u>665.00</u>

PLUG & FLOAT EQUIPMENT

	@	
	@	
	@	
	@	
	@	
TOTAL		

To Allied Cementing Co., Inc.
 You are hereby requested to rent cementing equipment and furnish cementer and helper to assist owner or contractor to do work as is listed. The above work was done to satisfaction and supervision of owner agent or contractor. I have read & understand the "TERMS AND CONDITIONS" listed on the reverse side.

TAX _____
 TOTAL CHARGE ~~1856.50~~
 DISCOUNT ~~1191.50~~ IF PAID IN 30 DAYS

SIGNATURE David Brady ANY APPLICABLE TAX WILL BE CHARGED UPON INVOICING. PRINTED NAME _____