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: Oil Producers Inc. Of Kansas API Number: 15 - 095-21918-00-00 Lease Name:_Sowers Address: Box 8647, Wichita, KS 67208 Phone: (316) 672 -6373 _____ Operator License #: 8061 Well Number: Spot Location (QQQQ): ______ - SE - SW Type of Well: Oil 330 (Oil, Gas D&A, SWD, ENHR, Water Supply Well, Cathodic, Other) (If SWD or ENHR) Feet from North / South Section Line The plugging proposal was approved on:_ _(Date) Feet from East / West Section Line _ Twp.__ _ East West 2-18-05 (KCC District Agent's Name) _s. R._6 County: KINGMAN Is ACO-1 filed? Yes 🗸 No Yes 🗸 No If not, is well log attached? Producing Formation(s): List All (If needed attach another sheet) Date Well Completed: Plugging Commenced: 01-18-05 _ Depth to Top: ___ Bottom: Depth to Top: ____ ___ Bottom: ___ ___ T.D. __ Plugging Completed: 01-19-05 Depth to Top: ____ __ Bottom: __ 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** 8 5/8 263 4244 4 1/2 10.5 3700' 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. Checked hole, bailed 4 sacks of cement, ripped pipe, pulled to 1100', pumped 35 sacks, pulled to 600', pumped 35 sacks, pulled to 310', circulated cement, pulled rest of pipe. RECEIVED FEB 17 2005 Name of Plugging Contractor: Quality Well Service, Inc. KCC WICHI Address: 401 West Main, Lyons, KS 67554 Name of Party, Responsible for Plugging Fees: Oil Producers Inc. of Kansas County, SENGWICK SS. (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) DIANA L. RICHECKY Motary Public - State of Kansas My Appt. Expires CRIBED. a My Commission Expires: