

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

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

API NUMBER 15-065-21010-00-00

LEASE NAME Jeffery

WELL NUMBER 1

1650 Ft. from S Section Line

4950 Ft. from E Section Line

SEC. 32 TWP. 6S RGE. 25 (or (W))

COUNTY Graham

Date Well Completed 4/1/78

Plugging Commenced 11/12/96

Plugging Completed 11/13/96

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

LEASE OPERATOR Northern Lights Oil Co., L.P.

ADDRESS P.O. Box 164, Andover KS 67002

PHONE# (316) 733-1515 OPERATORS LICENSE NO. 5474

Character of Well oil (depleted)

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

The plugging proposal was approved on 11/12/1996 (date)

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

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

Producing Formation Lansing-KC Depth to Top 3731 Bottom 3862 T.D. 3870

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"	290	0
				4 1/2"	3870	0

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 plugging materials were used, state the character of same and depth placed, from _____ feet to _____ feet each sack. 26 sacks of sand + 4 sacks of cement from 3870' to 3540', 4 1/2" casing perforated @ 2177' with 2 shots & @ 1350' with 2 shots, Allied pumped down 4 1/2" casing: 40 sacks 60/40/10 + 12 gel+150 sacks 60/40/10 to 1100p.s.i. pumped down 8 5/8X4 1/2" annulus 50 sacks 60/40/10.
 (If additional description is necessary, use BACK of this form.)

Name of Plugging Contractor Poe Well Service License No. 3152

Address P. O. Box 115, Oberlin, KS 67749

NAME OF PARTY RESPONSIBLE FOR PLUGGING FEES: Northern Lights Oil Co., L. P.

STATE OF KANSAS COUNTY OF BUTLER, ss.

JOHN W. SUTHERLAND, JR. (Employee of Operator) or (Operator)
 above-described well, being first duly sworn on oath, says: That I have knowledge of the facts and statements, and matters herein contained and the log of the above-described well as filed the same are true and correct, so help me God.

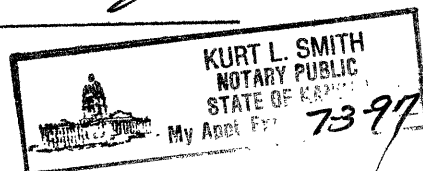
(Signature) [Signature]

(Address) P.O. Box 164, Andover, KS, 67002

SUBSCRIBED AND SWORN TO before me this 18th day of November, 1996

[Signature]
 Notary Public

My Commission Expires: 7-3-97



11-20-96
 96-0211