

Notice: Fill out COMPLETELY and return to Conservation Division at the address below within 30 days from plugging date.

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

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

Lease Operator: JD Production
Address: P.O. Box 254 Geneseo, Kansas 67444
Phone: (620) 824 6156 Operator License #: 8917

API Number: 15-159-21,655-00-00
Lease Name: Yost-Timmons
Well Number: 4

Type of Well: Oil Docket #: _____
(Oil, Gas D&A, SWD, ENHR, Water Supply Well, Cathodic, Other) (If SWD or ENHR)

Spot Location (QQQQ): _____ - NW - NE - NE
430 Feet from North / South Section Line

The plugging proposal was approved on: _____ (Date)

1270 Feet from East / West Section Line

by: Greg Even (KCC District Agent's Name)

Sec. 8 Twp. 18 S. R. 7 East West

Is ACO-1 filed? Yes No If not, is well log attached? Yes No

County: Rice

Producing Formation(s): List All (If needed attach another sheet)

Date Well Completed: _____

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

Plugging Commenced: 5-5-05

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

Plugging Completed: 5-6-05

_____ Depth to Top: _____ Bottom: _____ T.D. 3242'

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"	395'	None
				5-1/2"	3239'	2390'

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 _____ feet to _____ feet each set.

Plugged off bottom with sand to 3150' and 5 sacks cement. Cut casing loose @2390', pulled up to 1000', pumped 35 sacks cement & 100# hulls, pulled up to 700', pumped 35 sacks cement & 100# hulls, pulled up to 450' and circulated 155 sacks cement, 60/40 pos, 4% gel. Plugging Complete.

Name of Plugging Contractor: Mike's Testing & Salvage, Inc. License #: 31529

Address: P.O. Box 467 Chase, Kansas 67524

Name of Party Responsible for Plugging Fees: JD Production

State of Kansas County, Rice ss. _____

Mike Kelso (Employee of Operator) or (Operator) on above-described well, being first duty

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.

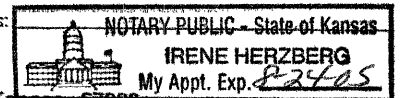
(Signature) *Mike Kelso*

(Address) P.O. Box 467 Chase, Kansas 67524

SUBSCRIBED and SWORN TO before me this 10th day of May, 2005

Irene Herzberg
Notary Public

My Commission Expires: _____



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

RECEIVED
MAY 11 2005
KCC WICHITA

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