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

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

K.A.R. 82-3-117

Lease Operator: Gore Oil Company					API Number: 137-20,198 700 00			
Address: P.O. Box 2757, Wichita, KS 67201-2757					Lease Name:			
Phone: (316) 263 -3535 Operator License #: 5552					Well Number: #3			
Type of Well: Docket #:					Spot Location (QQQQ): E/2 - SE - SE - 660 Feet from North / South Section Line			
The plugging proposal was a	approved on: 6-27-05			(Date) 3	30 Feet from ✓			
by: Bruce Basye (KCC District Agent's Name)							East ✓ West	
Is ACO-1 filed? ✓ Yes	No If not, is we	ell log attached	? Yes [ounty: Norton			
Producing Formation(s): List				Da	ate Well Completed:	11-20-80		
Reagan Depth to Top: 3474' Bottom: 3476' T.D. 3476'					Plugging Commenced: 6-28-05			
	Bottom: T.D			Plugging Completed: 6-28-05				
	Depth to Top:	Bottom:	T.0	D	ugging Completed:			
Show depth and thickness of	f all water, oil and gas	formations.						
The second secon					rface Conductor & Production)			
Formation	Content	From	То	Size	Put In	Pulled Out		
Surface	Oil, Water	0'	200'	8 5/8"	200'	0'		
Production	Oil, Water	0'	3474'	4 1/2"	3474'	0'	* (*)	
					5300			
Perf squeeze holes @ 95 Cmt circ tp surface. Pul	gs were used, state the 50' & 1680'. Run ope	character of s en end tbg to	ame depth pla 1950'. Hook	ced from (bottom), cup to tbg @ 195	to (top) for each plug	set. SMD w/350‡	‡ hulls in last 50 sx.	
max psi 700, shut in @	200 psi. Top off 4	1/2" w/18 sx	cmt. Job c	omplete.				
Name of Plugging Contractor: Swift Services, Inc.					License #: 32382 RECEIVED			
Address: P.O. Box 466	, Ness City, KS	67560-046	66				JUN 3 0 2005	
Name of Party Responsible for Plugging Fees: Gore Oil Company							CC WICHITA	
State of Kansas	_	Sedgwick , ss.				r	CC WIOI III	
Larry M. Jack				(Employee of One	erator) or (Operator) or	abovo dosor	ibed well, being first duly	
sworn on oath, says: That I h		facts statemen	_	s herein contained,	and the log of the ab			
	(Signature)	Jan	yM fl	rch			
REBECCA K. CF State of K My Appt. Exp.	ansas 3-20-07	(Address)_Wichita, KS						
THE CHARLES AND ADDRESS AND AD	SUBSCRIBED and S	WORN To before	ore me this			_	, 20 05	
	gereile	3. (All V Notary Pub)	yford	My Con	nmission Expires: 3	-20-0	7	