

STATE OF KANSAS
STATE CORPORATION COMMISSION
130 S. Market, Room 2078
Wichita, KS 67202

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

API NUMBER 15-135-23144-00-00

LEASE NAME Fritzler

WELL NUMBER 5-26

1650 Ft. from S Section Line

330 Ft. from E Section Line

SEC. 26 TWP. 18 RGE. 24 (E) or (W) (W)

COUNTY Ness

Date Well Completed 10-19-87

Plugging Commenced 7-20-05

Plugging Completed 7-20-05

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

LEASE OPERATOR APACHE DRILLING CO. INC.

ADDRESS P.O. BOX 68, Coaldale, CO 81222

PHONE (719) 942-3137 OPERATORS LICENSE NO. 6455

Character of Well Oil

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

The plugging proposal was approved on 7-16-05 (date)

by Mike Maiers (XCC District Agent's Name).

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

Producing Formation Mississippi Depth to Top 4280 Bottom 4282.5 D. 4330

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 |
|-------------|---------|---------|------|-------|--------|------------|
| Mississippi | Oil | Surface | 4330 | 5 1/2 | 4330 | None |
| | | | | | | |
| | | | | | | |

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 plug were used, state the character of same and depth placed, from _____ feet to _____ feet each set.
Ran tubing to 3969 and pumped 45 sks cement with 300# hulls, pulled tubing up to 1500' and pumped 145 sks cement, circulated to surface, pulled tubing, topped off with 45 sacks cement, pumped 25 sacks cement down the backside, pressured to 25# and held.

Name of Plugging Contractor Swift Services, Inc. PLAINS INC. License No. 32382

Address P.O. BOX 346, Ness City, KS 67560

NAME OF PARTY RESPONSIBLE FOR PLUGGING FEES: Apache Drilling Co., Inc.

STATE OF Kansas COUNTY OF Ness, ss.

Clint Base (Employee of Operator) or (Operator) of 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 as filed the the same are true and correct, so help me God.

(Signature) Clint Base
P.O. Box 68
(Address) Coaldale, CO 81222

SUBSCRIBED AND SWORN TO before me this _____ day of _____, 19 _____

Notary Public

My Commission Expires: _____

CP2/3
KCC
SEM
8-16-05
RECEIVED
AUG 15 2005
KCC WICHITA

Base