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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: Carmen Schmitt Inc. Address: PO Box 47 Phone: (620) 793-5100 Operator License #: 6569 Type of Well: oil Docket #: The plugging proposal was approved on: 11/9/05 by: Roger Moses Is ACO-1 filed? Yes No If not, is well log attached? Yes No Producing Formation(s): List All (If needed attach another sheet) LKC Depth to Top: 3044 Bottom: 3275 T.D. 3295

API Number: 15-163-01328-00-00 Lease Name: Adams A Well Number: 1 Spot Location (QQQQ): - SW - NE 3300 Feet from North / South Section Line 3300 Feet from East / West Section Line Sec. 33 Twp. 08 S. R. 16 East West County: Rooks Date Well Completed: July 1961 Plugging Commenced: 11/9/05 Plugging Completed: 11/9/05

Show depth and thickness of all water, oil and gas formations.

Table with 7 columns: Oil, Gas or Water Records (Formation, Content) and Casing Record (Surface Conductor & Production) (From, To, Size, Put In, Pulled Out). Rows show surface casing from 187' to 3068'.

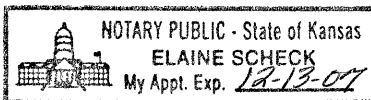
Describe in detail the manner in which the well is plugged, indicating where the mud fluid was placed and the method or methods used in introducing it into the hole. If cement or other plugs were used, state the character of same depth placed from (bottom), to (top) for each plug set.

MIRU Allied Cementing. Mixed 70 sacks of 60/40 Poz, 10% gel and pumped down surface pipe at 250 psi. Shut in and held at 100 psi. Allied tied on tubing and pumped 100 sacks of 60/40 Poz, 10% gel, down tubing. Circulated around annulus. Shut annulus in and pressured to 500 psi. Roger Moses with KCC was on hand to witness job.

Name of Plugging Contractor: DS&W Well Service License #: 6901 Address: PO Box 231, Claflin, KS 67525

Name of Party Responsible for Plugging Fees: Carmen Schmitt Inc. State of Kansas County, Barton, ss.

Jacob Porter (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) Jacob L Porter (Address) PO Box 47, Great Bend, KS 67530

SUBSCRIBED and SWORN TO before me this 18th day of November, 20 05 Elaine Schreck My Commission Expires: 12-13-07 Notary Public

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

Handwritten signature/initials.