

State Corporation Commission
 Conservation Division
 Wichita State Office Bldg.
 130 S. Market, Room 2078
 Wichita, KS 67202

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

API NUMBER 15-163-22060

LEASE NAME Griebel ⁰⁰⁻⁰⁰

WELL NUMBER A-1

4290 Ft. from S Section Line

1650 Ft. from E Section Line

SEC. 17 TWP. 7 RGE. 19 (E) or (W)

COUNTY Rooks

Date Well Completed 5/26/83

Plugging Commenced 7/25/2000

Plugging Completed 7/25/2000

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

LEASE OPERATOR Baird Oil Company Inc.

ADDRESS P.O. Box 428 Logan, KS 67646

PHONE# (785) 689-7456 OPERATORS LICENSE NO. 5352

Character of Well oil

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

The plugging proposal was approved on 7/12/2000 (date)
 by Carl Goodrow (KCC District Agent's Name).

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

Producing Formation KC Depth to Top 3179 Bottom 3386 T.D. 3458

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
<u>Unconsolidated</u>	<u>Shale + sand</u>	<u>Surface</u>	<u>100</u>	<u>8 5/8</u>	<u>207'</u>	<u>none</u>
<u>KC</u>	<u>Shale + lime</u>	<u>3179</u>	<u>3386</u>	<u>5 1/2</u>	<u>3457</u>	<u>None</u>

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
pressured annulus to 300'. Tied onto 6 1/2 casing and pumped
230 sacks of 60/140 Poz with 10% gel down casing along with 500'
of hulls, max pressure 1500'.

Name of Plugging Contractor Allied Cementing Co, Inc. License No. _____

Address P.O. Box 31 Russell, KS 67665

NAME OF PARTY RESPONSIBLE FOR PLUGGING FEES: Baird Oil Co. Inc

STATE OF KS COUNTY OF Phillips, ss.

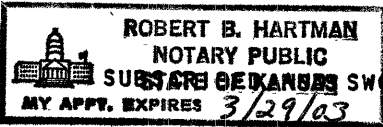
Jim R. Baird

(Employee of Operator) Wichita (Operator) o

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 that the same are true and correct, so help me God.

(Signature) Jim R Baird

(Address) P.O. Box 428 Logan KS 67654



SWORN TO before me this 26th day of July, 2000

Robert B. Hartman
 Notary Public

My Commission Expires: 3/29/03

USE ONLY ONE SIDE OF EACH FORM