

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 15-163-20, 161-10-00

LEASE NAME Rose E. Culp

WELL NUMBER 1

330' Ft. from S Section Line

3630' Ft. from E Section Line

SEC. 18 TWP. 7 RGE. 19 (E) or (W)

COUNTY Rooks

Date Well Completed 12/8/68

Plugging Commenced 7/25/2000

Plugging Completed 7/25/2000 (date)

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

LEASE OPERATOR Baird Oil Co. 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

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 3211 Bottom 3409 T.D. 3475

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>sand & shale</u>	<u>Surface</u>	<u>200</u>	<u>8 5/8</u>	<u>207</u>	<u>None</u>
<u>KC</u>	<u>shale & lime</u>	<u>3211</u>	<u>3409</u>	<u>5 1/2</u>	<u>3471</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 up to 500#. Pumped 260 sacks of 60/40 102 mix cement down casing with 500# of hulls. max pressure 300#. Shut-in pressure 200#.

RECEIVED
 STATE CORPORATION COMMISSION
 07-27-2000

Name of Plugging Contractor Allied Cementing Co. Inc License WUL 27 2000

Address P.O. Box 31 Russell, KS 67665

CONSERVATION DIVISION
 Wichita, Kansas

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

STATE OF Kansas COUNTY OF Phillips, ss.

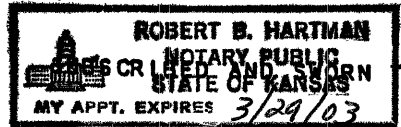
Jim L. Baird

(Employee of Operator) or (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 filled that the same are true and correct, so help me God.

(Signature) Jim L. Baird

(Address) P.O. Box 428 Logan KS



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

ALLIED CEMENTING CO., INC. 4896

Federal Tax I.D.# [REDACTED]

15-163-20161-00-00

REMIT TO: P.O. BOX 31
RUSSELL, KANSAS 67665

15-163-20161-00-00

SERVICE POINT: Dustin

DATE: <u>7/27/00</u>	SEC	TWP.	RANGE	CALLED OUT	ON LOCATION	JOB START	JOB FINISH
LEASE: <u>10-11-10</u>	WELL#	LOCATION: <u>Webster Overpass 3.0 W</u>		COUNTY: <u>Dewey</u>	STATE: <u>KS</u>		
(OLD OR NEW (Circle one)) <u>NEW</u>							

CONTRACTOR _____ OWNER _____

TYPE OF JOB: OH D

HOLE SIZE _____ T.D. _____

CASING SIZE: 5 1/2 DEPTH _____

TUBING SIZE _____ DEPTH _____

DRILL PIPE _____ DEPTH _____

TOOL _____ DEPTH _____

PRES. MAX _____ MINIMUM _____

MEAS. LINE _____ SHOE JOINT _____

CEMENT LEFT IN CSG. _____

PERFS _____

DISPLACEMENT _____

CEMENT AMOUNT ORDERED: 260 100# 1070 61

280 200# 500 # 11

COMMON _____ @ _____

POZMIX _____ @ _____

GEL _____ @ _____

CHLORIDE _____ @ _____

11 11 5 @ _____

_____ @ _____

_____ @ _____

_____ @ _____

HANDLING _____ @ _____

MILEAGE _____ @ _____

EQUIPMENT

PUMP TRUCK CEMENTER: Dan

153 HELPER: Bill

BULK TRUCK DRIVER: Glen

254

BULK TRUCK DRIVER: Len

251

RECEIVED
STATE CORPORATION COMMISSION

JUL 27 2000

REMARKS:

Plugs cement to soops.

5 1/2 CSG mixed 500# HULLS

w/260 SK cement @ 300 #

max PSI, Shut in @ 200

THURS

SERVICE

DEPTH OF JOB _____

PUMP TRUCK CHARGE _____

EXTRA FOOTAGE _____ @ _____

MILEAGE _____ @ _____

PLUG _____ @ _____

_____ @ _____

TOTAL _____

CONSERVATION DIVISION
Wichita, KS

CHARGE TO: Board Oil

STREET _____

CITY _____ STATE _____ ZIP _____

FLOAT EQUIPMENT

_____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

TOTAL _____

To Allied Cementing Co., Inc.
You are hereby requested to rent cementing equipment and furnish cementer and helper to assist owner or contractor to do work as is listed. The above work was done to satisfaction and supervision of owner agent or contractor. I have read & understand the "TERMS AND CONDITIONS" listed on the reverse side.

SIGNATURE: [Signature]

PRINTED NAME _____

TAX _____

TOTAL CHARGE _____

DISCOUNT _____ IF PAID IN 30 DAYS