

STATE OF KANSAS
 STATE CORPORATION COMMISSION
 200 Colorado Derby Building
 Wichita, Kansas 67202

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

API NUMBER 15-163-23,229-00-00

LEASE NAME Axelson

WELL NUMBER 8-24

660 Ft. from S Section Line

3020 Ft. from E Section Line

SEC. 24 TWP. 7 RGE. 19 (E) or (W)

COUNTY Rooks

Date Well Completed 07-05-93

Plugging Commenced 07-05-93

Plugging Completed 07-05-93

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

LEASE OPERATOR AFG Energy, Inc.

ADDRESS P.O. Box 458 Hays, KS 67601

PHONE#(913) 625-6374 OPERATORS LICENSE NO. 03456

Character of Well D&A

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

The plugging proposal was approved on 07-02-93 (date)

by Herb Deines (KCC District Agent's Name).

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

Producing Formation _____ Depth to Top _____ Bottom _____ T.D. 3465'

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

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

Bottom Plug: @ 3418' w/25 sacks cement thru drill pipe
 Next Plug: @ 1400' w/25 " " " " " 15 sacks in Rat Hole
 Next Plug: @ 805' w/100 " " " " "
 Next Plug: @ 370' w/40 " " " " "
 Top Plug: @ 40' w/10 " " " " "

Name of Plugging Contractor _____ License No. _____

Address _____

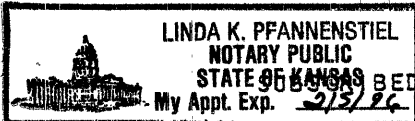
NAME OF PARTY RESPONSIBLE FOR PLUGGING FEES: _____

STATE OF _____ COUNTY OF _____, ss.

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

(Signature) Kerry W. Leecher

(Address) _____ STATE CORPORATION COMMISSION



AND SWORN TO before me this 20th day of AUG 23, 19 93

Linda K. Pfannenstiel
 Notary Public, Kansas

My Commission Expires: 2/5/96

USE ONLY ONE SIDE OF EACH FORM

8-23-93