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

API Number: <u>15</u> - 125-24147-00-00 Lease Operator: Dart Cherokee Basin Operating Co. LLC Lease Name: Edds Address: 211 W. Myrtle, Independence, Ks. 67301 Well Number: ___ Phone: (620) 331 -7870 Operator License #: 33074 Spot Location (QQQQ): _____ - SW - NE - NW Type of Well: Oil $\frac{4060}{\text{Feet from }} \ \, \boxed{\quad \, \text{North / }} \ \, \boxed{\checkmark} \ \, \text{South Section Line}$ (Oil, Gas D&A, SWD, ENHR, Water Supply Well, Cathodic, Other) (If SWD or ENHR) The plugging proposal was approved on: 12/20/2005 Feet from 🗸 East / West Section Line by: Alan Dunning ____ (KCC **District** Agent's Name) Sec. 27 Twp. 33 S. R. 14 Fast West County: Montgomery Is ACO-1 filed? Yes ✓ No If not, is well log attached? Yes / No Date Well Completed: N/A Producing Formation(s): List All (If needed attach another sheet) Plugging Commenced: 12/20/2005 Depth to Top: ___ _ Bottom: ___ Depth to Top: Bottom: TD Plugging Completed: 12/20/2005 Bottom: ___ T.D. Depth to Top: ___ Show depth and thickness of all water, oil and gas formations. Oil, Gas or Water Records Casing Record (Surface Conductor & Production) Formation Content From To Size Put In **Pulled Out** 0 20' 0 0 0 750' 2 7/8" 0 0 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. Plugged well using the squeeze method. A total of 28 sacks of Portland cement were used to plug this well. Shut in pressure was 1000 psi. Cut well head off below plow depth and restored location. Name of Plugging Contractor: W & W Production Company _____ License #: 5491 Address: 1150 HWY 39, Chanute, Ks. 66720 Name of Party Responsible for Plugging Fees: Dart Cherokee Basin Operating Co. LLC. __County, __Montgomery State of Kansas **Tony Williams** _ (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) LISA SHARTZER (Address) 211 W. Myrtle Independence, Ks. 67301 Notary Public - State of Kansas My Appt. Expires 5-26-06 SUBSCRIBED and SWORN TO before me this 2nd day of January _ My Commission Expires:

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

