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

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

TYPE OR PRINT

office within 30 days.

NOTICE: Fill out completely and return to Cons. Div.

API NUMBER 15-065-21,049 00

16

LEASE NAME Goddard

WELL NUMBER 1-32

SPOT LOCATION C W/2 SW SW

SEC. TWP. 75 RGE 24W (E) or (W)

COUNTY Graham

Date Well Completed

Plugging Commenced 8-11-86

Plugging Completed 8-15-86

LEASE OPERATOR Graham-Michaelis Corporation

211 N. Broadway

ADDRESS P.O. Box 247 Wichita, Kansas 67202

PHONE # (310 264-8394 OPERATORS LICENSE NO. 5134 Character of Well Oil

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

Did you notify the KCC/KDHE Joint District Office prior to plugging this well? Yes

Hays, Kansas Which KCC/KDHE Joint Office did you notify?

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

Producing formation ______ Depth to top_____ bottom_____T.D.3912'

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
	***************************************			8-5/8!!	312'	none
				4-1/2"	3911	834'
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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 plugs were used state, the character of same and depth placed, from feet to feet each set.

Plugged off bottom with sand to 3690' and 4 sacks cement. Shot pipe @1830', 1631', 1430' 1032', 834', pulled a total of 26 joints of 4-1/2" casing. Plugged surface with 200 sacks econolite and 5 sacks hulls.

Plugging Complete. (if additional description is necessary, use BACK of this form.)

Name of Plugging Contractor Kelso Casing Pulling, Inc. 6050 License No.

Address P.O. Box 347 Chase, Kansas 67524

STATE OF Kansas COUNTY OF Rice

Mike Kelso, Vice President

(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)

(Address)Box 347 Chase, Ks. 67524

SUBSCRIBED AND SWORN TO before me this 25thay of August , 19 86

IRENE HOOVER State of Kansas My Appt. Exp. Aug. 15, 1989

Notary Public

Form CP-4 Revised 01-84

My Commission expires: