

Notice: Fill out COMPLETELY and return to Conservation Division at the address below within 30 days from plugging date.

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION
WELL PLUGGING RECORD
K.A.R. 82-3-117

Form CP-4
September 2003
Type or Print on this Form
Form must be Signed
All blanks must be Filled

Lease Operator: Reginald D. Fisher
Address: 110 N. Exchange St. John, Ks. 67576
Phone: (620) 549-6528 Operator License #: 3493
Type of Well: Oil Docket #: _____
(Oil, Gas D&A, SWD, ENHR, Water Supply Well, Cathodic, Other) (If SWD or ENHR)
The plugging proposal was approved on: _____ (Date)
by: Jim Holland (KCC District Agent's Name)
Is ACO-1 filed? Yes No If not, is well log attached? Yes No
Producing Formation(s): List All (If needed attach another sheet)

Depth to Top: _____ Bottom: _____ T.D. _____

Depth to Top: _____ Bottom: _____ T.D. _____

Depth to Top: _____ Bottom: _____ T.D. _____

API Number: 15-145-21277-00-00
Lease Name: Smith
Well Number: 1
Spot Location (OQQQ): _____ - SW - SE - SW
330 Feet from _____ North / South Section Line
3630 Feet from East / _____ West Section Line
Sec. 22 Twp. 22 S. R. 15 East West
County: Pawnee
Date Well Completed: _____
Plugging Commenced: 1-09-06
Plugging Completed: 1-10-06

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
				8-5/8"	550'	None
				5-1/2"	3962'	2430'

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 _____ feet to _____ feet each set.
Plugged off bottom with sand to 3910' and 5 sacks cement. Cut casing loose @2430', pulled up to 1000', pumped 10 sacks gel and 50 sacks cement, pulled up to 600', pumped 50 sacks cement, pulled up to 40' and topped off with 20 sacks cement, 60/40 pos, 6% gel. Plugging Complete.

Name of Plugging Contractor: Mike's Testing & Salvage, Inc. License #: 31529
Address: P.O. Box 467 Chase, Kansas 67524
Name of Party Responsible for Plugging Fees: Reginald D. Fisher
State of Kansas County: Rice ss. _____
Mike Kelso (Employee of Operator) or (Operator) on above-described well, being first duly

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CONSERVATION DIVISION
WICHITA, KS

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) Mike Kelso
(Address) P.O. Box 467 Chase, Kansas 67524

SUBSCRIBED and SWORN TO before me this 31st day of January 20 06
Irene Herzberg My Commission Expires _____
Notary Public

NOTARY PUBLIC - State of Kansas
IRENE HERZBERG
My Appt. Exp. 8-28-09

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

Bm