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

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

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

Lease Operator: Hoffman OII, Inc.			API Number: 15	<u>. 185-20,279 °00 -00</u>
Address: 18368 Lawrence 2100 Mt. Vernon, MO.65712				orrison - Long "A"
Phone: (417/466 - 1133 Operator License #: 30681  Type of Well: Oil Docket #: (II SWD or, ENHR)			Well Number: 1  Spot Location (OQQQ):	
by: Richard Lacey	(KCC	District Agent's Name	1	22 S. R. 14 East XI West
Is ACO-1 filed? Yes No II not,	is well loỳ attached?	Yes No	ł	Stafford
Producing Formation(s): List All (II needed attach	another sheet)	•	1	ed:
Depth to Top:	Bottom:	· T.D	1	ned: 1-11-06
Depth to Top: Bottom: T.D.				
Depth to Top:	Bottom:	a.r	Plugging Completes	1-11-06
Show depth and thickness of all water, oil and	gas formations.			
Oil, Gas or Water Records		Casing Record (	Surlace Conductor & Pro	duction)
Formation Content	From   To	; Size	Put In	Pulled Out
;		8-5/8"	450	None
		4-1/2"	38841	None
		<u> </u>		1
A STATE OF THE COLUMN TO THE C				
Ran 2-3/8" tubing to 450', pumped 150 sac tubing and topped of	ks cement a	nd circulate	ed to surfac	ce. Layed down rest o
			- No. 1995 - Nov. 1996 - Mary Construction of the Spring State of the	gging Complete.
	and the part of the state of th		and the same of the same of the same and the same of t	
Name of Plugging Contractor: Mike's	Testing &	Salvage, Inc	License #: 31	.529
Address: P.O. Box 467	Chase, K	ansas 67524		KANSAS CORPORATION COMMISSI
Name of Party Responsible for Plugging Fees:_	Hoffm	an Oil, Inc.		FEB 0 1 2006
State ofKansas County	. Rice	. \$5.		CONSERVATION DIVISION
Mike Kelso		(Employee of	Operator) or (Operator	r) on above-described well, being first duty
swom on oath, says: That I have knowledge of	the facts statements, ar	nd matters herein contai	ned, and the log of the	above-described well is as filed, and the
same are true and correct, so help me God.		2.10		
	(Signature)	at 16	<u> </u>	·
	(Address) P.O.	Box 467	Ch	ase, Kansas 67524
SUBSCRIBED an	· · · · · · · · · · · · · · · · · · ·			idoc, Kalisas U/JZT
				2006
	d SWORN TO belore n	ne this 31stay of	January	20 <b>0</b> 6
	d SWOFIN TO before in		January Commission Expires:	NOTARY PUBLIC - State of Kansas IRENE HERZBERG