

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

Lease Operator: William T. Wax  
Address: P. O. Box 276 McCune, KS 66753  
Phone: (620) 724-3400 Operator License #: 3473  
Type of Well: D&A Docket #: \_\_\_\_\_  
(Oil, Gas D&A, SWD, ENHR, Water Supply Well, Cathodic, Other) (If SWD or ENHR)  
The plugging proposal was approved on: 4/1/04 (Date)  
by: Russell Hine (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)  
NONE Depth to Top: \_\_\_\_\_ Bottom: \_\_\_\_\_ T.D. \_\_\_\_\_  
\_\_\_\_\_ Depth to Top: \_\_\_\_\_ Bottom: \_\_\_\_\_ T.D. \_\_\_\_\_  
\_\_\_\_\_ Depth to Top: \_\_\_\_\_ Bottom: \_\_\_\_\_ T.D. \_\_\_\_\_

API Number: 15 - 021-20247-00-00  
Lease Name: Mullen-Kruger  
Well Number: 1  
18° EAST OF  
Spot Location (QQQQ): SW - SW - NW - NW  
1155 Feet from  North /  South Section Line  
183 Feet from  East /  West Section Line  
Sec. 24 Twp. 31 S. R. 21  East  West  
County: Cherokee  
Date Well Completed: 07/28/01  
Plugging Commenced: 04/02/04  
Plugging Completed: 04/02/04

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
NONE		0'	20'	5-1/2"	20'	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.

Ran 1" pipe to bottom and filled 4-3/4" hole with 20 sacks portland cement. Cement circulated. RTD 250'

Name of Plugging Contractor: Co. Tools License #: \_\_\_\_\_

Address: \_\_\_\_\_

Name of Party Responsible for Plugging Fees: Operator

State of Kansas County, Crawford, ss.

Operator (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) [Signature]  
(Address) \_\_\_\_\_

SUBSCRIBED and SWORN TO before me this 9th day of March, 20 06

Kathleen Stewart My Commission Expires \_\_\_\_\_  
Notary Public



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

RECEIVED  
MAR 13 2006  
KCC WICHITA

[Handwritten mark]