

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

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

API NUMBER 15-163-22,730  
LEASE NAME Reeder  
WELL NUMBER A-3  
SPOT LOCATION NW SW SW  
SEC. 20 TWP. 8s RGE 17 (E-W)  
COUNTY Rooks  
Date Well Completed 8/11/85  
Plugging Commenced 8/11/85  
Plugging Completed 8/11/85

TYPE OR PRINT  
NOTICE: Fill out completely  
and return to Cons. Div.  
office within 30 days.

LEASE OPERATOR The Dane G. Hansen Trust  
ADDRESS P.O. Box 187, Logan, KS 67646  
PHONE # (913) 689-4816 OPERATORS LICENSE NO. 5285

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

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

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

Is ACO-1 filed? attached If not, is well log attached? yes

Producing formation none Depth to top \_\_\_\_\_ bottom T.D. 3350

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"	258	none

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.

1st Plug	3250'	20sx	5th Plug	40'	10sx
2nd Plug	1300'	20sx	Rat Hole		10sx
3rd Plug	830'	100sx			
4th Plug	260'	40sx	60/40 poz, 4% gel, 3% CACL		

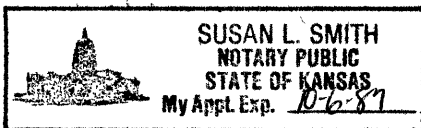
(If additional description is necessary, use BACK of this form.)

Name of Plugging Contractor Allied Cementing License No. \_\_\_\_\_  
Address P.O. Box 31, Russell, KS 67665

STATE OF Kansas COUNTY OF Sedgwick, ss.

Jay H. Galloway ~~XXXXXXXXXXXXXXXXXXXX~~ 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) Jay H. Galloway  
(Address) Jay H. Galloway, President



SUBSCRIBED AND SWORN TO before me, this 20 day of August, 1985

Susan L. Smith  
Notary Public  
Susan L. Smith

My Commission expires: STATE CORPORATION COMMISSION 6/87

SEP 10 1985 9-10 85

Form CP-4 1-84  
Revised 06-83