## RECEIVED

**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

## MAR 2 3 2006

Form CP-4 December 2003

KCC WICHTPAor Print on this Form
All blanks must be Filled

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

R. 82-3-117 All blanks must be F 15-007つススストリーロローロー

Lease Operator: Hummor	Corporation	API Number:15 - 007-222646 - 00 - 01 - 4					
Address: 950 N. Tyler Road, Wichita, KS 67212-3240					Lease Name:		
Phone: (316 ) 773 -2300 Operator License #: 5050					Well Number:		
Type of Well:  (Oil, Gas D&A, SWD, ENHR, Water Supply Well, Cathodic, Other)  The plugging proposal was approved on:  2/27/2006  (Date)  by: Steve Durant  (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)					Spot Location (QQQQ): C SW NE  3300		
	Depth to Top: 47	Date Well Completed:					
Depth to Top: 4699 Bottom: 4704 T.D					Plugging Commenced: 2/27/2006		
Depth to Top: 4598 Bottom: 4607 T.D					Plugging Completed: 3/1/2006		
Show depth and thickness of	of all water, oil and gas	formations.			and the second s		
Oil, Gas or Wa	ter Records		C	asing Record (S	urface Conductor & Pro	duction)	
Formation	Content	From	То	Size	Put In	Pulled Out	
				8 5/8	325	None	
				5 1/2	5262	2800	
2/27 - Set CIBP at 4550',	gs were used, state the unload tools. 2/28 - s , Allied load hole v	character of pot 2 sacks c vith 10 sack	same depth placement on CIB	nced from (botto P, rig up casing	m), to (top) for each p g tools, stretch and c	or methods used in introducing it intolug set. ut pipe at 2800', lay down casing POZ 6% gel, pull tubing	to the
Name of Plugging Contractor: Clarke Corporation					License #: 5105		
Address: P.O. Box 187,	Medicine Lodge. I						-
Name of Party Responsible	for Plugging Fees: Hu	mmon Corp	ooration				
State of Kansas	_	Barber		_ , SS.			
John Swinford	•,				On another) (Ou and a		
sworn on oath, says: That I same are true and correct, s	have knowledge of the o help me God.	facts statemer	$\alpha$ .	herein contain	ed, and the log of the	) on above-described well, being first above-described well is as filed, an	t duly d the
GLENDA MORRISO NOTARY PUBLIC STATE OF KANSAS My Appl. Exp.///3./2.	19	(Signature) P.O. Box 187, Medicine Lodge, KS 67104					
State in Contrast, purpos y the financial read the European bar applications in the contrast transmission in the state of the Contrast transmission in the Contra	SUBSCRIBED and SI	WORN TO bet	fore me this _2	20day of _N	/larch	, 20 06	***
	Alondo	Notary Pub	<u>Aar</u> lic	Му С	Commission Expires:	11/30/06	