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

RECEIVED

Form CP-4 December 2003

MAY 0 8 2006 Form must be Signed Form must be Filled

KCC WICHITA

Lease Operator: Gore	Oil Company	API Number: 15 - 137-20126-00-00					
Address: PO Box 2757, Wichita, KS 67201-2757					Legge Nems: Nelson C		
Phone: (316) 263 - 3535 Operator License #: 5552					Well Number: 2		
Type of Well: Oil Oil (Oil, Gas D&A, SWD, ENHR, Water Supply Well, Cathodic, Other) (If SWD or ENHR)					Spot Location (QQQQ): SW - NW - SE - 1650 Feet from North / South Section Line		
The plugging proposal was approved on: 4-11-06 (Date)					1650 Feet from East / West Section Line		
by: Rich Williams (KCC District Agent's Name)						5 S. R. 22 East	
Is ACO-1 filed? Yes No If not, is well log attached? Yes No					County: Norton		
Producing Formation(s): List All (If needed attach another sheet) L-KC Depth to Top: 3221' Bottom: 3407' T.D. 3470'					Date Well Completed: 3-27-78		
Reagan Depth to Top: 3467' Bottom: 3470' T.D.					Plugging Commenced: 4-12-06		
					Plugging Completed: 4-12-06		
Show denth and thickne	ess of all water, oil and				L		
	r Water Records	gas iormations		Casina Pacard (Surface Conductor & D.	- 4 - 4	
Formation	Content	From	То	Size	Surface Conductor & Production) Put In Pulled Out		
Surface	Oil, water	0	252'	8 5/8"	252'	0'	
Production	Oil, water	0	3468'	4 1/2"	3468'	O'	
Pump 80 sx SMD cmt	plugs were used, state	ated cmt to s	of same depth purface. Pulled t	laced from (botto tubing and hook	om), to (top) for each	d or methods used in introducing plug set. ng. Pumped 15 sx cmt. Hook	
Name of Plugging Contr	_{actor:} Swift Services, Ir	nc.				382	
Name of Plugging Contractor: Swift Services, Inc. Address: PO Box 466, Ness City, KS 67560-0466					License #: 020		
			mnony	· · · · · · · · · · · · · · · · · · ·			
Name of Party Responsi		0 1 1					
Larry M. Jack	County,			, SS.			
	at I house knowledge of the			(Employee of	Operator) or (Operator	r) on above-described well, beinç	g first duly
same are true and correct	ct, so help me God.	ne facts staten	nents, and matte	rs herein contain	ned, and the log of the	 on above-described well, being above-described well is as filed 	d, and the
		(Signature)	San	my M	lach		
REBECCA State	K. CRAWFORD of Kansas xp 3-30-47	(Address)	Wichita, KS /	/ /			
Section costs & M. White P.	SUBSCRIBED and	SWORN FO	before me this _	4thday of_	May		D 06
	Le relle	Notary F	uyora public	Му	Commission Expires:_	3-20-07	***************************************