

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: Carmen Schmitt Inc.

Address: PO Box 47

Phone: (620) 793-5100 Operator License #: 6569

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: _____ (Date)

by: _____ (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)

_____ Depth to Top: _____ Bottom: _____ T.D. _____

_____ Depth to Top: _____ Bottom: _____ T.D. _____

_____ Depth to Top: _____ Bottom: _____ T.D. _____

API Number: 15 - 101-21978-0000

Lease Name: Joyce

Well Number: 1

Spot Location (QQQQ): _____ - SW - NW - SW

1650 Feet from ☐ North / ☒ South Section Line

330 Feet from ☐ East / ☒ West Section Line

Sec. 26 Twp. 16s S. R. 28w ☐ East ☒ West

County: Lane

Date Well Completed: 12/18/06

Plugging Commenced: 12/18/06

Plugging Completed: 12/18/06

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
		0	208	8 5/8"	208	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.

240 sacks in 5 plugs. See cement ticket.

Name of Plugging Contractor: WW Drilling, LLC

License #: 33575

Address: PO Box 307, Wakeeney, KS 67672

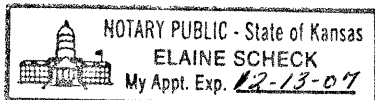
Name of Party Responsible for Plugging Fees: Carmen Schmitt Inc.

State of Kansas County, Barton, ss.

Jacob L. Porter

(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) Jacob L. Porter

(Address) PO Box 47, Great Bend, KS 67530

SUBSCRIBED and SWORN TO before me this 17 day of January, 20 07

Elaine Schreck
Notary Public

My Commission Expires: 12-13-07

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

RECEIVED
KANSAS CORPORATION COMMISSION
JAN 18 2007
CONSERVATION DIVISION
WICHITA, KS

[Handwritten initials]