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: Rains & Williamson Oil Co., Inc. API Number: ___**15 -** 065-23276-0000 Lease Name: Thomason-Maxfield Address: 220 W. Douglas, Suite 110, Wichita, KS 67202 Phone: (316) 265 -9686 2 - 20_____ Operator License #: _5146 Well Number:_ 170'e + 160'S OF
Spot Location (QQQQ): Type of Well: D&A (Oil, Gas D&A, SWD, ENHR, Water Supply Well, Cathodic, Other) (If SWD or ENHR) 1150 Feet from X North / South Section Line The plugging proposal was approved on: 3/13/07 500 Feet from East / X West Section Line by: Hays _ (KCC District Agent's Name) Sec. 20 Twp. 10 S. R. 21 East X West Is ACO-1 filed? X Yes No If not, is well log attached? Yes No County: Graham Producing Formation(s): List All (If needed attach another sheet) 3/13/07 Date Well Completed: _ Depth to Top: ___ __ Bottom: 3/13/07 Plugging Commenced: -Depth to Top: ____ ____ Bottom: ___ TD 3/13/07 Plugging Completed:__ Depth to Top: ___ ___ Bottom: ___ 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 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. Plugged with 225 sacks 60/40 Poz., 6% Gel., 1/4# flocele. 1st plug @ 3910' - 25 sacks, 2nd plug @ 1820' - 25 sacks, 3rd plug @ 1015' - 100 sacks, 4th plug @ 275' -40 sacks, top 40' - 10 sacks, rathole - 15 sacks, mousehole - 10 sacks. Name of Plugging Contractor: Allied Cementing Co., Inc. P. O. Box 31, Russell RAINS + Williamson Oil Name of Party Responsible for Plugging Fees: State of Kansas __ County. _ (Employee of Operator) or (Operator) on above-described we Juanita M. Green 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 Notary Public - State of Kansas My Appt. Expires 6-18-2009 (Address) 220 W. Douglas, Suite 110, Wichita, KS SUBSCRIBED and SWORN TO before me this <u>19th</u> day of <u>April</u> 2007 My Commission Expires: June 18, 2009

