

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

LEASE NAME Dora Smith
 WELL NUMBER 2
 _____ Ft. from S Section Lin
 _____ Ft. from E Section Lin
NW NW SE Ft. from E Section Lin
 SEC. 12 TWP. 9 RGE. 17 (E) or (W)
 COUNTY Rooks
 Date Well Completed 7-28-44
 Plugging Commenced 8-31-95
 Plugging Completed 8-31-95

LEASE OPERATOR Berexco, Inc.
 ADDRESS Box 723
 PHONE NO. 913 628 6101 OPERATORS LICENSE NO. 5363

Character of Well Oil
 (Oil, Gas, Water, Steam, Input, Water Supply Well)

The plugging proposal was approved on Dennis Hamel (date
 by _____ (KCC District Agent's Name).

Is ACC-1 filed? _____ If not, is well log attached? _____

Producing Formation _____ Depth to Top _____ Bottom _____ T.D. 3328

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
	Surface	0	158	13 3/4		None
	Casing	0	3219	7		None

Describe in detail the manner in which the well was plugged, indicating where the mud fluid placed and the method or methods used in introducing it into the hole. If cement or other pi were used, state the character of same and depth placed, from _____ feet to _____ feet each s
Pump 200 Sk. common down tubing. Displace to bottom of 1" at 1214'. Pull 300' of tbq. Pump 70 sk. 60/40 with 8% gel. Circulate to surface. Pull tbq. 1" broke off at swedge below 2 1/2 tbq. Hook to annulus pump 50 sk. down 13 3/4 pressure to 500#. Shut in 100#. Mix 280 sk pump down 7" pressure 600#. Shut in.

Name of Plugging Contractor Berexco, Inc.
 Address Box 723 Hays, Kansas 67601
 NAME OF PARTY RESPONSIBLE FOR PLUGGING FEES: Berexco, Inc.
 STATE OF Kansas COUNTY OF Ellis

RECEIVED 5363
 STATE CORPORATION COMMISSION
 9/11/95
 SEP 11 1995
 KANSAS

Mr. Ted Crawford (Employee of Operator) or (Operator)
 above-described well, being first duly sworn on oath, says: That I have knowledge of the fac
 statements, and matters herein contained and the log of the above-described well as filed i
 the same are true and correct, so help me, God.

NOTARY PUBLIC State of Kansas
 My Appt. Exp. 5-1-1999

(Signature) Ted Crawford
 (Address) Box 723 Hays, Mo. 67601
8 day of September, 19 95
Barbara Smith
 Notary Public
5-1-1999