

STATE OF KANSAS  
 STATE CORPORATION COMMISSION  
 200 Colorado Derby Building  
 Wichita, Kansas 67202

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

#4  
 API NUMBER 15-065-21784-00-00

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

LEASE NAME Worland  
 WELL NUMBER 1-10

         Ft. from S Section Line  
         Ft. from E Section Line  
 SEC. 10 TWP. 9S RGE. 22W (E) or (W)

LEASE OPERATOR Beacon Exploration Company  
 ADDRESS Suite 310 9800 N.W. Freeway, Houston Tx. 77092  
 PHONE# (713) 681-8510 OPERATORS LICENSE NO. 5342

COUNTY Graham  
 Date Well Completed           
 Plugging Commenced 5-5-93  
 Plugging Completed 5-5-93

Character of Well oil  
 (Oil, Gas, D&A, SWD, Input, Water Supply Well)

The plugging proposal was approved on          (date)  
 by Carl Goodrow (KCC District Agent's Name).

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

Producing Formation          Depth to Top          Bottom          T.D. 3903'

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
				8-5/8"	257'	none
				5-1/2"	3903'	none

Describe in detail the manner in which the well was 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 and depth placed, from feet to feet each set.  
Perforated 5-1/2" casing @1512', 1100', ran 1861' of 1" tubing down 5-1/2", pumped 225 sks cement and circulated to surface. Pulled 1" tubing out of casing, pumped 25 sacks cement to fill 5-1/2" casing to surface, pumped 10 sacks cement down 8-5/8" surface. 6835 Pcs, 10% gel.  
 Plugging Complete.

(If additional description is necessary, use BACK of this form.)

Name of Plugging Contractor KELSO CASING PULLING, INC. License No. 6050

Address P.O. Box 347 Chase, Kansas 67524

NAME OF PARTY RESPONSIBLE FOR PLUGGING FEES: Beacon Exploration Company

STATE OF Kansas COUNTY OF Rice, ss.

R. Darrell Kelso (Employee of Operator) or (Operator) of 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 as filed that the same are true and correct, so help me God.

(Signature) R. Darrell Kelso

(Address) P.O. Box 347 Chase, KS. 67524

SUBSCRIBED AND SWORN TO before me this 7th day of May, 19 93

Irene Herzberg  
 Notary Public

My Commission Expires:         



RECEIVED  
 STATE CORPORATION COMMISSION  
 5-10-93  
 MAY 10 1993  
 Form 624  
 Revised 05-88  
 INSURANCE DIVISION  
 Wichita, Kansas