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: Parwest Land Exploration,Inc.					API Number: 15 -	077-3	0191-00-01
Address: 2601 NW Expressway - Suite 904 East Oklahoma City, OK 73112					Lease Name: Harder	r <del>"OWWO</del> " K	're PETOIN
Phone: (405 ) 843 - 1914 Operator License #: 32712					Well Number:	<u> </u>	0191-00-01 COPHTPU CPZ/3
Type of Well:    D&A   Docket #:					Spot Location (QQQQ): C - NE - SW -		
The plugging proposal was approved on: 10-26-07 (Date)					Feet from North / South Section Line  1980 Feet from East / West Section Line		
by: Steve VanGieson (KCC District Agent's Name)					Feet from [	East / <b>∀</b> 9	West Section Line
Is ACO-1 filed? Yes	No If not, is v				Sec Twp County: Harper Cour		East West
Producing Formation(s): List All (If needed attach another sheet)					•		
Depth to Top: Bottom: T.D					Date Well Completed: 10-26-07 Plugging Commenced: 10-26-07		
	Botto	m:	T.D				
Depth to Top: Bottom: T.D				T.D.	Plugging Completed: 10-26-07		
Show depth and thickness	of all water, oil and gas	formations.					
					Surface Conductor & Production)		
Formation	Content	From	То	Size	Put In	Pulled Out	
Describe in detail the mann hole. If cement or other plu 1st Plug: 1400' w/35 sac 2nd Plug: 900' w/35	lgs were used, state the	character of Ipipe	same depth p	laced from (botto	om), to (top) for each plug	g set.	Third die
3rd Plug: 300' w/35						Kance	RECEIVED AS CORPORATION COMMISSION
Top Plug: 60' w/25 Rath	nole w/15 Mousehole v	v/10				18-114OF	
Name of Plugging Contractor: Duke Drilling Co., Inc.							<del>JAN 3 0 2008</del>
Address: P.O. Box 823 Great Bend, Kansas 67530					License #: 0020	Ç	ONSERVATION DIVISION WICHITA, KS
Name of Party Responsible				n,Inc.			Wildelin, No
State of	County,			, ss.			
				(Employee of (	Operator) or (Operator) or		
sworn on oath, says: That I same are true and correct, s	have knowledge of the food.	acts statemen	its, and matter	s herein containe	Operator) or (Operator) or ed, and the log of the ab	n above-described ove-described we	d well, being first duly all is as filed, and the
OHNSON	(\$	Signature)	Herk	ral K	Honopui		
MISSION TO THE TENT OF THE TEN	(A	Address) 2	101 N	Lu Exy	14 900 E	oke,	<u> </u>
COMMSSIZI COMMSS	SUBSCRIBED and SW	VORN TO bef	MST-	314 of My C	November Commission Expires:01	118/20	, <u>20</u> 07/
OKLAHOMA	Mail to: KCC - Conse	)	-	Market - Room	2078, Wichita, Kansas	s 67202 .	CVO