

STATE OF KANSAS
STATE CORPORATION COMMISSION
130 S. Market, Room 2078
Wichita, KS 67202

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

API NUMBER 15-065-22812-0000

LEASE NAME RIGGS

WELL NUMBER 1

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

1680 Ft. from (S/N) Line of Section (circle one)

960 Ft. from (E/W) Line of Section (circle one)

LEASE OPERATOR A & A PRODUCTION

SPOT LOCATION S/2 NE/4 SE/4

ADDRESS PO BOX 100

SEC. 23 TWP. 8 S. RGE 23 (E) or (W)

CITY, STATE, ZIP HILL CITY KS 67642

COUNTY GRAHAM

PHONE#(785) 421-6222 OPERATORS LICENSE NO. 30076

Date Well Completed 1-11-01

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

Date Plugging Commenced 1-20-01

Date Plugging Completed 1-20-01

The plugging proposal was approved on 1-20-01 (date)

by KCC HERB DEINES (KCC District Agent's Name)

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

Producing Formation(s) _____ Depth to Top _____ Bottom _____ T.D. _____

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	PULL OUT
				8" 5/8	210	0

Described 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.

Mixed 25 sacks at 1800 feet; mix 100 sacks at 1000 ft; mix 40 sacks at 260 ft;

mixed 10 sacks at 40 feet 15 sacks for rat hole

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

Name of Plugging Contractor A & A PRODUCTION

License No. 30076

Address PO BOX 100 HILL CITY KS 67642

NAME OF PARTY RESPONSIBLE FOR PLUGGING FEES: ANDY ANDERSON

STATE OF KANSAS COUNTY OF GRAHAM, ss.

ANDY ANDERSON

(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) [Signature]

(Address) PO BOX 100 HILL CITY KS 67642

SUBSCRIBED AND SWORN TO before me this 23rd day of January, 2001

My Commission Expires: January 21, 2004

Notary Public



RITA A. ANDERSON
Graham County, Kansas
My Appt. Exp. _____

Form CP-6
Revised 12-92

RECEIVED
STATE CORPORATION COMMISSION
FEB 12 2001
2/12/01