

API NUMBER 15-173-20,492-00-60

LEASE NAME Mollett

TYPE OR PRINT

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

WELL NUMBER 3

990 Ft. from S Section Line

330 Ft. from E Section Line

SEC. 9 TWP. 28 RGE. 2 (E) or (W)

COUNTY Sedgwick

Date Well Completed _____

Plugging Commenced 10-7-94

Plugging Completed 10-10-94

LEASE OPERATOR Prairie State Petro

ADDRESS Box 305, Leon

PHONE# (316) 745-3754 OPERATORS LICENSE NO. 03095

Character of Well Good

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

The plugging proposal was approved on 9-12-94 (date)

by Mike Wilson (KCC District Agent's Name).

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

Producing Formation _____ 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	Pulled out
				8 5/8	220	None
				4 1/2	N/A	1950

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 plugging materials were used, state the character of same and depth placed, from _____ feet to _____ feet each section. Sanded bottom to 3200, dumped 4sx cement at 3200 with bailer, cut and pulled casing to 270 feet, circulated cement to surface, pulled casing, top off with cement.

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

Name of Plugging Contractor Clarke Corporation License No. 5105

Address P.O. Box 187, Medicine Lodge, KS 67104

NAME OF PARTY RESPONSIBLE FOR PLUGGING FEES: Prairie State Petro.

STATE OF Kansas COUNTY OF Barber, ss.

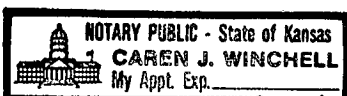
Jeff Sletto (Employee of Operator) or (Operator)

above-described well, being first duly sworn on oath, says: That I have knowledge of the facts and circumstances of the above-described well, and the log of the above-described well, and that the same are true and correct, so help me God.

(Signature) Jeff Sletto

(Address) Medicine Lodge, KS 67104

SUBSCRIBED AND SWORN TO before me this 14 day of October, 1994



My Commission Expires: 6-21-95

Caren J. Winchell
Notary Public

RECEIVED
OCT 17 1994
STATE CORPORATION COMMISSION
OPERATIONS DIVISION
WICHITA, KANSAS