

API NUMBER 15-163-20006-00-01
LEASE NAME George
WELL NUMBER #2

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

LEASE OPERATOR Black Diamond Oil, Inc.
ADDRESS P.O. Box 641
PHONE# 913625-5891 OPERATORS LICENSE NO. 7076
Character of Well Oil
(Oil, Gas, D&A, SWD, Input, Water Supply Well)

_____ Ft. from S Section Line
_____ Ft. from E Section Line
SEC. 32 TWP. 10 RGE. 16 (E or W)
COUNTY Rooks (original)
Date Well Completed 3-10-97
Plugging Commenced 4-1-97
Plugging Completed 4-1-97

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

Is ACO-1 filed? N/A If not, is well loc. attached?
Producing Formation Lansing K.C. Depth to Top 3167 Bottom 3370 T.D. 3570

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
				<u>4 1/2</u>	<u>211'</u>	<u>0</u>
				<u>8 5/8</u>	<u>3597'</u>	<u>0</u>

05-07-19
97

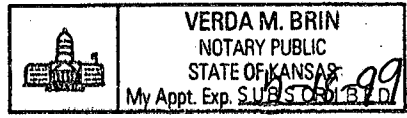
Describe in detail the manner in which the well was plugged, indicating where the mud fluid was placed and the method or methods used in introducing it into the hole. If cement or other plug were used, state the character of same and depth placed, from feet to feet each set.
Mixed 80 sacks at 2000' with 300# HULLS. mixed 80 sacks with 200# HULLS at 1000'. Cement circulated. mixed 55 sacks down 411' 700# (shut in pressure, 500#) mixed 500 sacks down 828' max 500# shut in 300#
(If additional description is necessary, use BACK of this form.)

Name of Plugging Contractor Allied Cementing License No. _____
Address P.O. Box 31 Russell, KS 67665

NAME OF PARTY RESPONSIBLE FOR PLUGGING FEES: Black Diamond Oil, Inc
STATE OF Kansas COUNTY OF Ellis, ss.

Kenneth Vehige (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) P.O. Box 641



AND SWORN TO before me this 28th day of April, 19 97
Verda M. Brin
Notary Public

My Commission Expires: 7-18-99