STATE OF KANSAS STATE CORPORATION 130 S. Market, Room Wichita, KS 67202	COMMISSION 2075CEIVED SAS CORPORATION COMMISSION	N TYPE OF	-62-3	-117 wr	LEASE N	BER 15-179-20.627 -00 - 07 AME Robben "P" MBER 7		
MAY 2 8 200% office: Fill out completely and return to Completely and return to Completely conservation division office within 30 days. WICHITA, KS LEASE OPERATOR Ritchie Exploration. Inc.								
						3080 Ft. from E Section Line		
					sec. 27	SEC. 27 TWP. 85 RGE. 26 (E) or (W)		
ADDRESS PO Box	73188 Wichita	a. KS 6	7278	3-3188	COUNTY	Sheridan		
PHONES 316 691-	9500 OPERATORS L	I CENSE N	o	4767	Date We	II Completed $12/9/81$		
Character of Well oil					Pluggin	Plugging Commenced $5/15/03$		
(011, Gas, D&A, SW	D, Input, Water Su	pply Wel	1)		Plugging	g Completed $5/15/03$		
The plugging propo	sal was approved o	n <u>Ma</u>	y 15	2003		(date)		
						C District Agent's Name).		
Is ACO-1 filed?	ves_If not,	is well	log a	ttached?_				
Producing Formatio	n <u>L/KC "K"</u>	Depth	to T	op_3871!	Batte	3877 T.D. 3960'		
Show depth and thi	ckness of all wate	r, oll a	nd ga	s formati	ons.			
OIL, GAS OR WATER	RECORDS	1		C	ASING RECO	RO		
Formation	Content	From	To	Size	Put In	Pulled out		
L/KC	oil & brine	36931	300	5! 8 54	8" 214'	none		
				5 1/2"	3950'	none		
placed and the mewere used, state Ran tubing to 200 Pumped 50 sx ceme & 50# hulls ceme down 5 1/2" casin down 8 5/8" casin Name of Plugging 0	the character of 1. Pumped 50 s 200# hull het circulated g Max=250# S ag. Max=250#. S contractor Allied	x cement	trodu nd de led face =100 ting	cing it in the place of the pla	nto the home ded, from the 570's ded tubing ded 110 sing company	ing where the mud fluid walle. If cement or other plug feet to feet each set led tubing to 1391'. Pumped 40 sx cement Pumped 40 sx cement cement & 50# hulls plete @ 2:30 p.m. 5/15/03 60/40 poz, 10% gel)		
Address PO Rox 3				-		T		
NAME OF PARTY RESP	ONSIBLE FOR PLUGGI				ploration	n, Inc.		
STATE OF Kansas	<u> </u>	UNTY OF	Se					
statements, and the same are true	ell, being first du matters herein com and correct, so he SUBSCRIBED AND SWOR	atained as ip me Go	nd th	ath, says e log of Signature Address)	PO Box Wichit	of Operator) or (Operator) of the facts described will as filed that as a filed that a filed tha		
1	My Commission Expir	E N	otary Pul	EN HOPPER blic - State of K	ansas	Form CP-4 Revised 05-68		