

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

Well Plugging Record  
K.A.R. -82-3-117

API NUMBER 15-017-20546 -00-01  
LEASE NAME Kissel  
WELL NUMBER 2

TYPE OR PRINT

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

3240' Ft. from North Line of Section  
2290' Ft. from West Line of Section

KCC Pkt  
Per Pkt  
map

LEASE OPERATOR American Energies Corporation #5399  
ADDRESS 155 N Market, Suite 710  
CITY, STATE, ZIP Wichita, KS 67202  
PHONE # 316-263-5785  
Character of Well SWD

SPOT LOCATION NE SW SW NE  
Section 29 Township 19S Range 7E  
County Chase  
Date Well Completed 10/13/88  
Date Plugging Commenced 5/20/08  
Date Plugging Completed 5/20/08

The plugging proposal was approved on May 20, 2008  
by Mike Wilson (KCC District Agent's Name)

Is ACO-1 Filed? Previously Filed If not, is well log attached? On file with KCC  
Producing Formation(s) Ireland Sand Depth to Top 990 Bottom 1068 T.D. 1112  
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
Surface	Water sands	60'	0'	6 5/8"	60'	None
Production	Saltwater	Surface	1112'	2 7/8"	1112'	None

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 plugs were used, state the character of same and depth placed, from \_\_\_\_\_ feet to \_\_\_\_\_ feet each set.

Cemented at 899' with 35 sx cement (60/40 poz - 15 sx gel), pulled 35 jts 1", topped off well with cement.  
United Cementing Ticket #8485

Name of Plugging Contractor American Energies Corporation #5399  
License No. 5399  
Address 155 North Market, #710 City: Wichita State: Kansas Zip 67202

NAME OF PARTY RESPONSIBLE FOR PLUGGING FEES: American Energies Corporation (Operator)

STATE OF KANSAS COUNTY OF Sedgwick, ss.

Alan L. DeGood, President (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) Alan L. DeGood  
(Alan L. DeGood, President, American Energies Corporation)

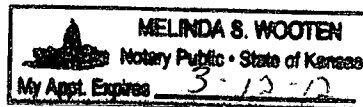
(Address) 155 North Market, Suite 710 City: Wichita State: Kansas Zip 67202

SUBSCRIBED AND SWORN TO me this 21st day of May 2008

Melinda S. Wooten, Notary Public

My Commission Expires: 3/12/12

Form CP-4  
Revised 12-92



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KANSAS CORPORATION COMMISSION

MAY 28 2008

CONSERVATION DIVISION  
WICHITA, KS

Handwritten initials

Mindy

AMERICAN ENERGIES CORPORATION  
P.O. Box 516, 136 N. Main  
Canton, KS 67428  
Phone: 620-628-4424, Fax: 620-628-4435

Rig # 1  
Lease: Rissel  
County: Chase

Daily Rig Activity  
Date: 5/20/08  
Well #: 2

(Make sure to include well #)

**WORK PERFORMED:**

(Please check appropriate box)

**Pump Change:**  
New: \_\_\_\_\_ Rebuilt: \_\_\_\_\_ Type of Pump: \_\_\_\_\_ Size of Pump: \_\_\_\_\_  
Pump Set at: \_\_\_\_\_ feet down

**Rod Part:**  
Rod Break - Number of Jts Down \_\_\_\_\_  
Size and Type of Rod \_\_\_\_\_ Kind of Break \_\_\_\_\_ Size and Type of Replacement \_\_\_\_\_  
Rods Set at: \_\_\_\_\_ feet down

**Tubing Failure:**  
Tubing Leak - Number of Jts Down \_\_\_\_\_  
Size and Type of Tubing \_\_\_\_\_ Kind of Break \_\_\_\_\_ Size and Type of Replacement \_\_\_\_\_  
Replaced with New \_\_\_\_\_ or Used \_\_\_\_\_  
Tubing Set at: \_\_\_\_\_ feet down

**Casing Liner:**  
Size: \_\_\_\_\_ Setting Depth of Casing Liner: \_\_\_\_\_ SX of Cement: \_\_\_\_\_

Acidizing	
Frac Well	
Perforating Well	
Squeeze Job	
Workover	
Rod Part	
Tubing Leak	
Pump Change	
Plugging well	
Other	

**Description of Work Performed:**

Drive to well, cement at 899' with 35 sacks (United), pull 35 jts 1', top off with cement, pick up, rig down.

Joint	Foot Size	Pulled from Well	Equipment	Joint	Foot Size	Run In Well
			Anchor			
			Polished Rod			
			Rods			
		2' 4' 6' 8' 10'	Rod Subs			2' 4' 6' 8' 10'
			Pump			
			Tubing			
		2' 4' 6' 8' 10'	Tubing Subs			2' 4' 6' 8' 10'
			Barrel			
			Anchor			

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MAY 28 2008

CONSERVATION DIVISION  
WICHITA, KS

**Plugging Well:**  
Please Complete Information:

<u>35</u>	Number of Sacks cement at _____
	Number of Sacks cement at _____
	Number of Sacks cement at _____
	Number of Sacks cement at _____
	Total Number of Sacks of Cement _____

<u>899'</u>	feet
	feet
	feet

Type of Cement used: 60/40 PDZ  
Ticket number: 8485

Contracting Company: United  
Date Plugging Completed: 5/20/08  
State Plugging Agent: Mike Wilson

Service	Hour	Per Hour	Amount
Unit and Power Tools			\$
Road Time - Per hour			\$
Other Charges			\$

Sales Tax \_\_\_\_\_  
Total Due \_\_\_\_\_

Date: 5/21/08 Signed: [Signature]

Please complete and fax this report daily to: 316-283-1851



**SERVICE TICKET**

8485

1-800-794-0187  
 FAX 1-316-321-4720  
 2510 W. 6TH ST.  
 EL DORADO, KANSAS 67042

DATE 5-20-08

COUNTY Chase CITY Elmdale

CHARGE TO American Energy  
 ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ ST \_\_\_\_\_ ZIP \_\_\_\_\_  
 LEASE & WELL NO. KISSEL # 2 CONTRACTOR \_\_\_\_\_  
 KIND OF JOB Plug SEC. \_\_\_\_\_ TWP. \_\_\_\_\_ RNG. \_\_\_\_\_  
 DIR. TO LOC. \_\_\_\_\_

OLD  NEW

Quantity	MATERIAL USED	Serv. Charge
	<u>900'</u>	<u>650.00</u>
<del>355c</del>	<del>60/40P02</del>	<u>306.25</u>
<u>1SK</u>	<u>Gel</u>	<u>13.50</u>
<u>35</u>	BULK CHARGE	<u>40.25</u>
<u>78.83Tm</u>	BULK TRK. MILES	<u>78.83</u>
<u>53</u>	PUMP TRK. MILES	<u>185.50</u>
	PLUGS	
		SALES TAX
		TOTAL

RECEIVED  
 KANSAS CORPORATION COMMISSION  
 MAY 28 2008  
 CONSERVATION DIVISION  
 WICHITA, KS

T.D. \_\_\_\_\_ CSG. SET AT \_\_\_\_\_ VOLUME \_\_\_\_\_  
 SIZE HOLE \_\_\_\_\_ TBG SET AT \_\_\_\_\_ VOLUME \_\_\_\_\_  
 MAX. PRESS. \_\_\_\_\_ SIZE PIPE \_\_\_\_\_  
 PLUG DEPTH \_\_\_\_\_ PKER DEPTH \_\_\_\_\_  
 PLUG USED \_\_\_\_\_ TIME ON LOCATION \_\_\_\_\_ TIME FINISHED \_\_\_\_\_

REMARKS:  
Start mix Cmtl 0845-8900 - Pull 1" hbag to 30' top off 915  
Min & Pump 355K 60/40P02 470 Gel

EQUIPMENT USED  
 NAME Royce UNIT NO. \_\_\_\_\_ NAME \_\_\_\_\_ UNIT NO. \_\_\_\_\_  
Bobby \_\_\_\_\_  
Raymond \_\_\_\_\_  
Greg \_\_\_\_\_

CEMENTER OR TREATER

OWNER'S REP.