15-163-21306-00-00

STATE OF KANSAS
STATE CORPORATION COMMISSION
200 Colorado Derby Building
Wichita, Kansas 67202

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

API NUMBER 15-

LEASE NAME Schoenthaler

WELL NUMBER #2

_____ Ft. from S Section Line

_____ Ft. from E Section Line

SEC. 28 TWP. 8 RGE. 18W (E)or(W)

COUNTY Rooks

Date Well Completed 7/15/81

Plugging Commenced 9/29/88

Plugging Completed 10/4/88

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

LEASE OPERATOR FRONTIER OIL COMPANY

ADDRESS 1437 N. Franklin Russell, KS 67665

PHONE# (913) 483-5348 OPERATORS LICENSE NO. 5140

Character of Well _____

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

RECEIVED STATE CORPORATION COMMISSION OCT 17 1988 CONSERVATION DIVISION Wichita, Kansas

The plugging proposal was approved on 10-17-88 (date)

by _____ (KCC District Agent's Name).

Is ACO-1 filed? _____ 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	288	none
				4 1/2	3416	2230

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.

Plugged bottom with sand to 3275', ran 4 sacks cement. Shot @2527', 2230'. Pulled to 1300', pumped 20 sx cement, 11 sx. gel, pulled to 775', pumped 120 sx. cment, pulled to 320', pumped 50 sx cement, 4 sx gel, filled 8 5/8" casing with 25 sacks cement.

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

Name of Plugging Contractor KELSO CASING PULLING, INC. License No. 6050

Address P.O. Box 347 Chase, KS 67524

NAME OF PARTY RESPONSIBLE FOR PLUGGING FEES: FRONTIER OIL COMPANY

STATE OF Kansas COUNTY OF Rice ,ss.

R. Darrell Kelso (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) R. Darrell Kelso

(Address) P.O. Box 347 Chase, KS 67524

SUBSCRIBED AND SWORN TO before me this 11th day of October, 1988

Irene Hooper
Notary Public

My Commission Expires: _____

IRENE HOOPER
State of Kansas
My Appt. Exp. Aug. 15, 1989

Form CP-4
Revised 05-88