Notice: Fill out COMPLETELY and return to Conservation Division at the address below within 60 days from plugging date.

KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

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

Form CP-4
December 2003
Type or Print on this Form
Form must be Signed
All blanks must be Filled

Lease Operator: Rama Operating Co., Inc. Address: P.O. Box 159 Stafford, KS. 67578 Phone: (620) 234 -5191 Operator License #: 3911 Type of Well: D & A (Oil, Gas D&A, SWD, ENHR, Water Supply Well, Cathodic, Other) Ocket #: (If SWD or ENHR)					API Number:								
							The plugging proposal was approved on: 7-25-08 (Date)						
							by: Eric McLaren (KCC District Agent's Name)					Sec. 24 Twp. 2	9 S. R. 14 East West
							Is ACO-1 filed? ✓ Yes No If not, is well log attached? Yes No					County: Pratt	
Producing Formation(s): List	All (If needed attach an	other sheet)					Date Well Complete						
Depth to Top: Bottom: T.D					Plugging Commenced: 7-27-08								
	Depth to Top:	Bottom: T.D			Plugging Completed: 7-27-08								
	Depth to Top:	Bottom	n: T.	D	Plugging Completed	3:							
Show depth and thickness	of all water, oil and gas	formations.											
Oil, Gas or Water Records Casing Record (Surface Conductor & Production)													
Formation	Content	From	To ·	Size	Put In	Pulled Out							
	·			8 5/8	312	0							
		,											
	-												
			-										
			1										
hole. If cement or other plu	ugs were used, state the ottom plug at 4396	e character of	same depth place of the place o	80' w/ 50 sx	tom), to (top) for each part 340' v	w/ 50sx; Top plug at 60' w/ 20 sx.							
10 sks. mousehole; T													
	sterling	2 Dri	lluig	. Co		RECEIVED KANSAS CORPORATION COMMISS							
Name of Plugging Contract Address: P.O. Box 86	or: Basic Energy So	ervices.	U	KCCPL	2/3 License #:32	453 5142 AUG 27 2008							
			-4:			CONSERVATION DIVISION							
Name of Party Responsible			ating Co.,	inc		WICHITA, KS							
State of Kansas	County, _	Stafford	<u> </u>	_ , ss.									
Robin L. Austin of Ra	ma Operating Co.,	Inc.		(Employee o	of Operator) or (Operato	r) on above-described well, being first duly							
sworn on oath, says: That I same are true and correct,		e facts stateme	nts, and matter			e above-described well is as filed, and the							
		(Signature)			4 075-5								
		(Address) P.	O. Box 159	Stafford, k	(s. 6/578								
A MOTADY DUDI 10 O	SUBSCRIBED and	SWORN TO by	fore me this _	29th day of	July	, 20 08							
NOTARY PUBLIC - State of DAWN SCHREIE	Kansas X \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	m Il			y Commission Expires:	5-1-11							
My Appt. Exp. 57-		Notary Pui	blic		, Johnmadion Expired.,								

