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

23242-00-01

Lease Operator: Trans Pacific Oil Corporation					API Number: 15 - 035-23248	
Address: 100 S Main, Ste 200, Wichita, KS 67202					Lease Name: Means "A"	
Phone: (316) 262 -3596 Operator License #: 9408					Well Number:	
Type of Well: FOR Docket #: E38 109 (Oil, Gas D&A, SWD, ENHR, Water Supply Well, Cathodic, Other) Operator License #: 5455 Docket #: E38 109 (If SWD or ENHR)					Spot Location (QQQQ): N2 - S2 - SE - 990 Feet from North / South Section Line 1320 Feet from East / West Section Line Sec. 20 Twp. 30 S. R. 5 Feast West County: Cowley Date Well Completed: 5-14-83 Plugging Commenced: 08-13-08 Plugging Completed: 08-14-08	
The plugging proposal was approved on: 8-14-08 (Date)						
by: Jeff Klock (KCC District Agent's Name)						
Is ACO-1 filed? Yes No If not, is well log attached? Yes No						
Producing Formation(s): List All (If needed attach another sheet)						
Depth to Top: Bottom: T.D						
Depth to Top: Bottom: T.D						
	Depth to Top:	Bottom	n: T.1	D '	- lagging Completed:	
Show depth and thickness of	of all water, oil and gas	s formations.				•
Oil, Gas or Wa	iter Records		Cá	asing Record (Surf	face Conductor & Produc	ction)
Formation	Content	From	То	Size	Put In	Pulled Out
				8 5/8	207	,
				4 1/2	2961	1640
	acks cement, dug cell	ar and small p	it, set floor, pu	ılled slips, had 1	1" stretch, ripped cas	emptied pit, backfilled pit and cellar.
					License #: 31925	
Address: 190 US Highw						,
Name of Party Responsible						
	County,	_		, ss.		
Gary Sharp						n above-described well, being first duly
sworn on oath, says: That I same are true	have knowledge of the to help me God.	_		herein contained	, and the log of the at	pove-described well is as filed, and the
KD CHARES	* * * *	(Signature)	l l	Shay	2	·
The the state of	•			, #200, Wi		
Ser S. The	SUBSCRIBED and S	,	fore me this _o	(l_" day of	August	GLENNA E. LOWI
same are true and correct, s	_ Minna	Notary Pub	e. lic	My Co	mmission Expires:	MOTARY PUBLIC STATE OF KARSAS My Appl Exp. 12-21-((