

STATE OF KANSAS  
STATE CORPORATION COMMISSION  
130 South Market, Room 2078  
Wichita, KS 67202

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

API NUMBER 15-065-21,627 - 0001

LEASE NAME ALBERTSON

TYPE OR PRINT  
NOTICE: Fill out completely  
and return to Cons. Div.  
office within 60 days.

WELL NUMBER #6  
(SE SW NW)  
2310 Ft. from N Section Line  
990 Ft. from W Section Line

LEASE OPERATOR John O. Farmer, Inc.

SEC. 18 TWP. 9S RGE. 23 XXXXXX (W)

ADDRESS P.O. Box 352, Russell, KS 67665

COUNTY Graham

PHONE# (785) 483-3144 OPERATORS LICENSE NO. 5135

Date Well Completed 5-11-82

Plugging Commenced 10-17-00

Plugging Completed 10:30 A.M., 10-17-00

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

The plugging proposal was approved on October 3, 2000 (date)  
by (District #4) (KCC District Agent's Name).

Is ACO-1 filed? Yes If not, is well log attached? \_\_\_\_\_

XXXXXXXXXX Formation Lansing "I" & Lansing "K" Depth to Top 3878' Bottom 3926' T.D. 3975'

(Injection)

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
Lansing "I"	water	3878'	3883'	8-5/8"	217'	-0-
Lansing "K"	water	3916'	3926'	4-1/2"	3972'	-0-

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.

Mixed 10 sks. cement down 8-5/8" casing & pressured. Tied on to 4-1/2" casing, mixed 5 hulls w/1st part of 220 sks. cement.

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

RECEIVED  
STATE CORPORATION COMMISSION

Name of Plugging Contractor Allied Cementing Company, Inc. License No. \_\_\_\_\_

OCT 31 2000

Address P.O. Box 31, Russell, KS 67665

NAME OF PARTY RESPONSIBLE FOR PLUGGING FEES: John O. Farmer, Inc. CONSERVATION DIVISION  
Wichita, Kansas

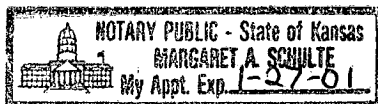
STATE OF Kansas COUNTY OF Russell, ss.

John O. Farmer III XXXXXXXXXXXXXXXXXXXXXXXX (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) John O. Farmer III

(Address) P.O. Box 352, Russell, KS 67665

SUBSCRIBED AND SWORN TO before me this 30th day of October, 20 00



Margaret A. Schulte  
Notary Public  
Margaret A. Schulte

Form CP-4  
Revised 05-88