

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 15-065-21,548-0001

LEASE NAME KLENK

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

WELL NUMBER #6  
(NW SE NE)

1650 Ft. from N Section Line  
990 Ft. from E 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 12-22-81

Plugging Commenced 10-17-00

Plugging Completed 12:30 P.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? \_\_\_\_\_

XXXXXXXXX Formation Lansing "I" Depth to Top 3899' Bottom 3905' T.D. 3990'

(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   | 3899' | 3905' | 8-5/8" | 208'   | -0-        |
|             |         |       |       | 4-1/2" | 3989'  | -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.

Tied on to 8-5/8" casing & pressured to 400#. Tied on to 4-1/2" casing & mixed 5 hulls w/240 sks. cement - pressured to 1000#.

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

Name of Plugging Contractor Allied Cementing Company, Inc. License # STATE CORPORATION COMMISSION

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

NAME OF PARTY RESPONSIBLE FOR PLUGGING FEES: John O. Farmer, Inc.

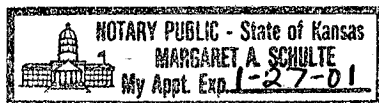
STATE OF Kansas COUNTY OF Russell, ss.

John O. Farmer III XXXXXXXXXXXXXXXXXXXXXXXXXXXX (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

*(Handwritten initials)*