STATE OF KANSAS WELL PLUGGING RECORD STATE CORPORATION COMMISSION K.A.R.-82-3-117 API NUMBER 15-NA 200 Colorado Derby Building LEASE NAME Rome Wichita, Kansas 67202 TYPE OR PRINT WELL NUMBER 1-1 NOTICE: Fill out completely and return to Cons. Div. 1980 Ft. from S Section Line office within 30 days. 3360 Ft. from E Section Line LEASE OPERATOR Murfin Drilling Company, Inc. SEC. 27 TWP. 9 RGE.25 (X) or (W) ADDRESS 250 N. Water, Suite 300 Wichita, KS 67202 COUNTY Graham PHONE#(913) 674-2103 OPERATORS LICENSE NO. 30606 Date Well Completed N/A Character of Well Injection Plugging Commenced 12/9/93 (Oil, Gas, D&A, SWD, Input, Water Supply Well) Plugging Completed 12/9/93The plugging proposal was approved on 4/24/93 (date) by <u>Carl Goodrow</u> (KCC District Agent's Name). Is ACO-i filed? N/A If not, is well log attached? Producing Formation <u>LKC</u> Depth to Top 4039 Bottom 4076 T.D.4112 Show depth and thickness of all water, oil and gas formations. OIL, GAS OR WATER RECORDS CASING RECORD Formation Content Size From Put in Pulled out LKC_ Water 4039 4076 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. Pumped down 5 1/2" casing w/400 sx 60-40 Poz, 8% gel, 500# hulls. Max PSI 500 psig. ISIP 200 psig. Checked 8 5/8, pressured to 300 psig. held. RECEIVED STATE CORPORATION COMMISSION (If additional description is necessary, use BACK of this form.) DEC 1 4 1993 Name of Plugging Contractor License No. 12-14-93 CONSERVATION DIVISION Wiehita, Kansas-NAME OF PARTY RESPONSIBLE FOR PLUGGING FEES: (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

(Signature) / / O/M

AND SWORN TO before me this 73___ gay of__

My Commission Expires: June 24, 1997

the same are true and correct, so help me God.

NUTARY PUBLISHED STATE OF HANSE BONNA BERNATED

Donna Gerstner Notary Public Form CP-4 Revised 05-88

(Address) /P.O. 130 HICCCITYKI