

15-063-21395-00-00

STATE OF KANSAS
STATE CORPORATION COMMISSION
200 Colorado Derby Building
Wichita, Kansas 67202

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

API NUMBER 15-063-21,395-00-00

LEASE NAME Gormley

TYPE OR PRINT

NOTICE: Fill out completely
and return to Cons. Div.
office within 30 days.

WELL NUMBER 1

4950 Ft. from S Section Line

4865 Ft. from E Section Line

LEASE OPERATOR Ritchie Exploration, Inc.

SEC. 26 TWP. 11 RGE. 30 ~~XXX~~(W)

ADDRESS 125 N. Market - #1000, Wichita, KS 67201

COUNTY Gove

PHONE#(316) 267-4375 OPERATORS LICENSE NO. 4767

Date Well Completed 8-11-91

Character of Well D & A

Plugging Commenced 8-11-91

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

Plugging Completed 8-11-91

The plugging proposal was approved on August 11, 1991 (date)

by Dennis Hamel (KCC District Agent's Name).

Is ACO-1 filed? No If not, Is well log attached? No

Producing Formation _____ Depth to Top _____ Bottom _____ T.D. 4570'

Show depth and thickness of all water, oil and gas formations.

OIL, GAS OR WATER RECORDS

CASING RECORD

RECEIVED
STATE CORPORATION COMMISSION

8-23-1991

AUG 23 1991

Formation	Content	From	To	Size	Put In	Pulled out
				8 5/8"	218'	None

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.

Spotted 25 sx. cement at 2425' thru drill pipe.

Spotted 100 sx. cement at 1500' thru drill pipe.

Spotted 40 sx. cement at 250' thru drill pipe.

Spotted 10 sx. cement at 40' thru drill pipe. Spotted 15 sx. cement in rathole

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

Name of Plugging Contractor White & Ellis Drilling, Inc. License No. 5420

Address P. O. Box 48848, Wichita, KS 67201-8848

NAME OF PARTY RESPONSIBLE FOR PLUGGING FEES: Ritchie Exploration, Inc.

STATE OF KANSAS COUNTY OF SEDGWICK, ss.

Michael L. Considine (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 the same are true and correct, so help me God.

(Signature) Michael L. Considine

(Address) P. O. Box 48848
Wichita, KS 67201-8848

SUBSCRIBED AND SWORN TO before me this 14th day of August, 19 91

Carolyn J. Tjaden
Notary Public

My Commission Expires: _____
CAROLYN J. TJADEN
NOTARY PUBLIC
STATE OF KANSAS

AUG 16 1991