

15-063-21399-00-00

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

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

API NUMBER 15-063-21,399

LEASE NAME Engel

WELL NUMBER 3

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

2240 Ft. from S Section Line

990 Ft. from E Section Line

SEC. 17 TWP. 11 RGE. 31 ~~XCHIK(W)~~

COUNTY Gove

Date Well Completed 1-17-92

Plugging Commenced 1-17-92

Plugging Completed 1-17-92

LEASE OPERATOR Ritchie Exploration, Inc.

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

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

Character of Well D & A

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

The plugging proposal was approved on January 17, 1992 (date)

by David Wann (KCC District Agent's Name).

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

Producing Formation _____ Depth to Top _____ Bottom T.O. 4675'

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

RECEIVED

OIL, GAS OR WATER RECORDS | CASING RECORD KANSAS CORPORATION COMMISSION

Formation	Content	From	To	Size	Put in	Pulled out
				8 5/8"	203'	None
						JAN 27 1992
						1-27-1992
						CONSERVATION DIVISION
						WICHITA, KS

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 2520' thru drill pipe. Spotted 15 sx. cement
Spotted 100 sx. cement at 1690' thru drill pipe. in rathole.
Spotted 40 sx. cement at 260' thru drill pipe.
Spotted 10 sx. + wiper plug at 40' thru drill pipe.

(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 22nd day of January, 19 92

Carolyn J. Tjaden

Notary Public

My Commission Expires:

CAROLYN J. TJADEN
NOTARY PUBLIC
STATE OF KANSAS