

API NUMBER 15-163-30198-0000

LEASE NAME BICE UNIT

WELL NUMBER #5

330 Ft. from SN Line of Section (circle one)

4290 Ft. from EW Line of Section (circle one)

SPOT LOCATION C . SE . SW . SW

SEC. 06 TWP. 10 S. RGE 17 W (E) or (W)

COUNTY ROOKS

Date Well Completed 9-20-66

Date Plugging Commenced 3-14-00

Date Plugging Completed 3-14-00

LEASE OPERATOR CARMEN SCHMITT INC.

ADDRESS P.O. BOX 47

CITY, STATE, ZIP GREAT BEND, KS 67530

PHONE#(316) 793 5100 OPERATORS LICENSE NO. 6569

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

The plugging proposal was approved on Verbal, 3-10-00 (date)

HERB DEINES (KCC District Agent's Name)

ACO-1 filed? YES If not, is well log attached? _____

Producing Formation(s) Kansas City Depth to Top _____ Bottom _____ T.D. _____

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

WATER, GAS OR WATER RECORDS

CASING RECORD

FORMATION	CONTENT	FROM	TO	SIZE	PUT IN	PULL OUT
				8 5/8	153	- 0 -
				4 1/2	3558	- 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.

Pressured 8 5/8 to 500 p.s.i. and held. Pumped 195 sx cement and 5 sx hulls down 4 1/2. Shut in at 200 p.s.i.

Cement - 195 sx 60/40 POZ, 10% GEL.

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

Name of Plugging Contractor ALLIED CEMENTING

License No. _____

Address RUSSELL KS

Name of Party Responsible for Plugging Fees: CARMEN SCHMITT INC.

State of KANSAS County of BARTON, ss.

CARMEN SCHMITT (Employee of Operator or (Operator) of above-described well, being first

do hereby swear 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.

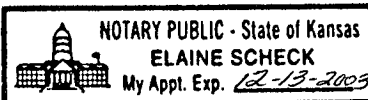
Signature) Carmen Schmitt

Address) _____

Subscribed and sworn to before me this 20TH day of MARCH, 192000

Elaine Schick
 Notary Public

My Commission Expires: 12-13-2003



RECEIVED
 STATE CORPORATION COMMISSION

3-21-00
 MAR 21 2000

CONSERVATION DIVISION
 Wichita, Kansas
 Form CP-4
 Revised 12-92



ALLIED CEMENTING CO., INC. 3752

15-163-30198-0000

REMIT TO P.O. BOX 31
RUSSELL, KANSAS 67665

SERVICE POINT:

DATE <u>3-14-00</u>	SEC. <u>6</u>	TWP. <u>10^s</u>	RANGE <u>17^w</u>	CALLED OUT	ON LOCATION	JOB START	JOB FINISH <u>11:15 AM</u>
LEASE <u>Bice</u>	WELL # <u>5</u>	LOCATION <u>Painville, 2E 25 1W</u>			COUNTY <u>Rooks</u>	STATE <u>Ks</u>	
OLD OR NEW (Circle one)							

CONTRACTOR
TYPE OF JOB plug to abandon

HOLE SIZE _____ T.D. _____

CASING SIZE 4 1/2 DEPTH _____

TUBING SIZE _____ DEPTH _____

DRILL PIPE _____ DEPTH _____

TOOL _____ DEPTH _____

PRES. MAX _____ MINIMUM _____

MEAS. LINE _____ SHOE JOINT _____

CEMENT LEFT IN CSG. _____

PERFS. _____

DISPLACEMENT _____

OWNER

CEMENT
AMOUNT ORDERED 195⁰⁰ 10% gel
5 Hulls

COMMON	<u>117</u>	@	<u>6.35</u>	<u>742.95</u>
POZMIX	<u>78</u>	@	<u>3.25</u>	<u>253.50</u>
GEL	<u>23</u>	@	<u>9.50</u>	<u>218.50</u>
CHLORIDE		@		
<u>Hulls</u>	<u>5</u>	@	<u>15.50</u>	<u>77.50</u>
		@		
		@		
		@		
HANDLING		@	<u>1.05</u>	<u>204.75</u>
MILEAGE	<u>4 1/2 SK</u>	@	<u>1.00</u>	<u>210.00</u>
TOTAL				<u>1612.80</u>

EQUIPMENT

153
PUMP TRUCK # _____ CEMENTER HELPER paul

BULK TRUCK # 291 DRIVER Dave

BULK TRUCK # 254 DRIVER Jason

REMARKS:
pressured 8 1/2 to 500 psi + held
tried on to 4 1/2 mix of 5
shell up 1st part of 195 etc
max 600 psi
shut in @ 200 psi

SERVICE

DEPTH OF JOB _____

PUMP TRUCK CHARGE 2nd well 195.00

EXTRA FOOTAGE _____ @ _____

MILEAGE _____ @ _____

PLUG _____ @ _____

_____ @ _____

_____ @ _____

TOTAL 195.00

CHARGE TO: Carmen Schmitt Inc

STREET _____

CITY _____ STATE _____ ZIP _____

FLOAT EQUIPMENT

_____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

TOTAL _____

To Allied Cementing Co., Inc.
You are hereby requested to rent cementing equipment and furnish cementer and helper to assist owner or contractor to do work as is listed. The above work was done to satisfaction and supervision of owner agent or contractor. I have read & understand the "TERMS AND CONDITIONS" listed on the reverse side.

SIGNATURE Curtis Hitchman

TAX _____

TOTAL CHARGE _____

DISCOUNT _____ IF PAID IN 30 DAYS

PRINTED NAME
RECEIVED
STATE CORPORATION COMMISSION

MAR 21 2000