

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

LEASE OPERATOR Carmen Schmitt Inc.

SPOT LOCATION SE - NW - NE -

ADDRESS P.O. Box 47

SEC. 7 TWP. 10 S. RGE 17W (E) or (W)

CITY, STATE, ZIP Great Bend KS 67530

COUNTY Rooks

PHONE#(620) 7935100 OPERATORS LICENSE NO. 6569

Date Well Completed 10-10-64

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

Date Plugging Commenced 12-20-00

Date Plugging Completed 12-20-00

The plugging proposal was approved on 12-18-00 (date)

by Herb Deines (KCC District Agent's Name)

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

Producing Formation(s) Kansas City Depth to Top 3403 Bottom 3492 T.D. 3558

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 | PULL OUT |
|-----------|---------|------|----|------|--------|----------|
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |

Described 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.

Circulate cement to surface from 1050'. Tied to 4 1/2"
casing and pressured to 500 p.s.i. Shvt in at 300 p.s.i.
Tied to annulus pressure 300 p.s.i. shut in at 100 p.s.i.
Used 180 sx 60/40 po2, 10% gel, 5 sx hulls.
(If additional description is necessary, use BACK of this form.)

Name of Plugging Contractor Alliced 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

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) Carmen Schmitt

(Address) _____

RECEIVED
STATE CORPORATION COMMISSION
3-5-01
MAR 5 2001

CONSERVATION DIVISION
Wichita, Kansas

SUBSCRIBED AND SWORN TO before me this 28 day of February, 192001

Elaine Scheck
Notary Public

My Commission Expires: 12-13-2003



Handwritten initials

ALLIED CEMENTING CO., INC.

4736

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

SERVICE POINT: R

| | | | | | | | |
|-------------------------|-----------------|---------------------------------|-------|---------------------|-----------------------------|-----------|-----------------------------|
| DATE <u>12/29/00</u> | SEC. <u>1st</u> | TWP. <u>2</u> | RANGE | CALLED OUT | ON LOCATION <u>9:30A.M.</u> | JOB START | JOB FINISH <u>11:30A.M.</u> |
| LEASE <u>W. Schmidt</u> | WELL # <u>2</u> | LOCATION <u>P.ville 2s 1/2E</u> | | COUNTY <u>Woods</u> | STATE <u>Ks</u> | | |
| OLD OR NEW (Circle one) | | <u>N Into</u> | | | | | |

CONTRACTOR Express

TYPE OF JOB Oil

HOLE SIZE _____ T.D. _____

CASING SIZE 4 1/2" DEPTH _____

TUBING SIZE 2" DEPTH _____

DRILL PIPE _____ DEPTH _____

TOOL _____ DEPTH _____

PRES. MAX _____ MINIMUM _____

MEAS. LINE _____ SHOE JOINT _____

CEMENT LEFT IN CSG. _____

PERFS. _____

DISPLACEMENT _____

OWNER _____

CEMENT

AMOUNT ORDERED 200 ^{100%} 100% Cel

5 Halls

USED 180SK

| | | | | |
|--------------|-------------------|---|--------------|---------------|
| COMMON | <u>108</u> | @ | <u>6.35</u> | <u>685.80</u> |
| POZMIX | <u>72</u> | @ | <u>3.25</u> | <u>234.00</u> |
| GEL | <u>13</u> | @ | <u>9.50</u> | <u>123.50</u> |
| CHLORIDE | | @ | | |
| <u>Halls</u> | <u>5</u> | @ | <u>15.50</u> | <u>77.50</u> |
| | | @ | | |
| | | @ | | |
| | | @ | | |
| | | @ | | |
| HANDLING | <u>224</u> | @ | <u>1.05</u> | <u>235.20</u> |
| MILEAGE | <u>.04/sk/mi.</u> | | | <u>206.08</u> |

TOTAL 4562.08

EQUIPMENT

PUMP TRUCK CEMENTER Paul

153 HELPER _____

BULK TRUCK DRIVER Shane

110

BULK TRUCK DRIVER _____

REMARKS:

Tried to annulus 25' x 50' # Halls
Press to 300psi. Shut in @ 100psi.
Circ. Cement @ 1050' w/ 110SK
w/ 450 # Halls. Tied to 4 1/2" CSG.
Mixed 45' x 50' to 500 psi.
Shut in @ 300psi

SERVICE

DEPTH OF JOB _____

PUMP TRUCK CHARGE _____ 450.00

EXTRA FOOTAGE @ _____

MILEAGE 23 @ 3.00 69.00

PLUG @ _____

@ _____

@ _____

TOTAL 519.00

CHARGE TO: Carmen Schmidt

STREET _____

CITY _____ STATE _____ ZIP _____

FLOAT EQUIPMENT

@ _____

@ _____

@ _____

@ _____

@ _____

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.

TOTAL _____

TAX _____

TOTAL CHARGE _____

DISCOUNT _____ IF PAID IN 30 DAYS

SIGNATURE _____

PRINTED NAME _____