

Notice: Fill out COMPLETELY and return to Conservation Division at the address below within 50 days from plugging date.

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION
WELL PLUGGING RECORD
K.A.R. 82-3-117

Form CG-4
October 2009
Type or Print on this Form
Form must be Signed
All blanks must be Filled

Lease Operator: Oil Producers Inc. of Kansas

Address: 1710 Waterfront Parkway

Phone: (316) 681-0231 Operator License #: 8061

Type of Well: Gas Docket #: _____
(Oil, Gas D&A, SWD, ENHR, Water Supply Well, Calhediz, Other) (if SWD or ENHR)

The plugging proposal was approved on: _____ (Date)

by: _____ (KCC District Agent's Name)

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

Producing Formation(s): List All (if needed attach another sheet)

Kansas City-A Depth to Top: 4539 Bottom: 4545 T.D. _____

Depth to Top: _____ Bottom: _____ T.D. _____

Depth to Top: _____ Bottom: _____ T.D. _____

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

Oil, Gas or Water Records		Casing Record (Surface Conductor & Production)				
Formation	Content	From	To	Size	Put in	Pulled Out
Kansas City-A	Gas	0	4972	4 1/2	4972	

Describe in detail the manner in which the well is 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 depth placed from (bottom), to (top) for each plug set.

set CIBP @ 4500' + dump ball 25x cent on CIBP, work casing free point 2050'
by stretch, rip casing @ 2020' + did not free up, tried ripping 1950', 1900' & 1720' &
would not catch pin, free point w/ wireline @ 1800', shoot pipe @ 1730', lay down casing,
plug w/ 50 sx cent @ 1690', 50 sx cent @ 600' + circulate 60' to surface

Name of Plugging Contractor: Blackhawk Well Service, LLC License #: 34091

Address: 1710 Waterfront Parkway, Wichita, KS 67206

Name of Party Responsible for Plugging Fees: Oil Producers Inc. of Kansas

State of Kansas County, Sedgwick, ss.

Oil Producers Inc. of Kansas (Employee of Operator) or (Operator) or 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 it as filed, and the same are true and correct, so help me God.

LORIA A. ZEHR
Notary Public - State of Kansas
My Appt. Expires 5/5/10

(Signature) [Signature]

(Address) 1710 Waterfront Parkway, Wichita, KS 67206

SUBSCRIBED and SWORN TO before me this 30th day of April, 2009

Lora A. Zehr My Commission Expires: May 5, 2010
Notary Public

15-081-21203-00-00

API Number: ~~15-081-21203-00-00~~

Lease Name: Schnellbacher Trust

Well Number: 1-323

Spot Location (OOOO): _____ - NE - NW

660 Feet from North / South Section Line

1980 Feet from East / West Section Line

Sec. 23 Twp. 30 S. R. 34 East West

County: Neosho

Date Well Completed: 8/1953

Plugging Commenced: 4/8/09

Plugging Completed: 4/9/09

[Handwritten initials]