WELL PLUGGING RECORD API NUMBER 15-109-20,648-00-00 STATE OF KANSAS K.A.R.-82-3-117 STATE CORPORATION COMMISSION 130 S. Market, Room 2078 LEASE NAME Nicholson Wichita, KS 67202 TYPE OR PRINT WELL NUMBER #1-29 NOTICE: Fill out completely 2310' Ft. from & Section Line and return to Coas. Div. office within 30 days. 330' Ft. from & Section Line LEASE OPERATOR Ranken Energy Corporation SEC. 29 TWP. 115 RGE. 37 (E) or (W) ADDRESS 601 N. Kelly, #103 COUNTY Logan PHONE # (405) 340-2363 OPERATORS LICENSE NO. 3447 Date Well Completed 08-01-97 Character of Well D/A Plugging Commenced __07-31-97 (OII, Gas, D&A, SWD, Input, Water Supply Well) Plugging Completed 08-02-97 The plugging proposal was approved on ______07-31-97 (KCC District Agent's Name). by ______David Wand Is ACO-1 filed? Enclosed If not, is well log attached? Producing Formation ______ Depth to Top______ Bottom______T.D.__ Show depth and thickness of all water, oil and gas formations. OIL, GAS OR WATER RECORDS CASING RECORD Formation Content Put in Pulled out ... From To Size 8 5/8" None · Describe in detail the manner in which the well was plugged, indicating where the mud fluid wa placed and the method or methods used in introducing it into the hole. If cement or other plug were used, state the character of same and depth placed, from__feet to___feet each set Fill with heavy mud. 1st plug from 2610'-2510' with 25 sks. 2nd plug from 1690'-1290' with 100 sks, 3rd plug from 300'-140' with 40 sks, 4th plug from 40'-0' with 10 sks. 15 sks in rat hole, 190 sks 60/40 pos, 6% gel, 1/4# floseal per sk. Name of Plugging Contractor Abercromble RTD, Inc. License No. 30684 Address 150 N. Main, Suite 801, Wichita, KS 67202 NAME OF PARTY RESPONSIBLE FOR PLUGGING FEES: STATE OF OKLAHOMA COUNTY OF OKLAHOMA Randolph L. Coy (Employee of Operator) or (Operator) o 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 the tha the same are true and correct, so help me God. (Signature) MINIMALE OTAS SO (Address)

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