

Notice: Fill out COMPLETELY and return to Conservation Division at the address below within 60 days from plugging date.

RECEIVED KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION JUL 08 2009 WELL PLUGGING RECORD K.A.R. 82-3-117

Form CP-4 December 2003 Type or Print on this Form Form must be Signed All blanks must be Filled

KCC CP 2/3

KCC WICHITA

Lease Operator: FALCON EXPLORATION INC.

Address: 125 N. MARKET, SUITE 1252, WICHITA KS 67202

Phone: (316) 262-1378 Operator License #: 5316

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

The plugging proposal was approved on: (Date)

by: B J HOPE (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)

Depth to Top: Bottom: T.D. 4379

API Number: 15 - 155-21245 - 0000

Lease Name: KNOWLES TRUST

Well Number: 1-SWD

Spot Location (QQQQ): SW - NE - NE - NE

5104808 Feet from North South Section Line

510598 Feet from East West Section Line

Sec. 17 Twp. 23 S. R. 8 East West

County: RENO

Date Well Completed: 6/93

Plugging Commenced: 6/4/09

Plugging Completed: 6/5/09

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

Table with columns: Oil, Gas or Water Records (Formation, Content) and Casing Record (Surface Conductor & Production) (From, To, Size, Put In, Pulled Out). Row 1: ARB O/H, WATER, 4097, 4379, 8-5/8", 206, 0. Row 2: 5-1/2, 4097, 1980.

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.

Name of Plugging Contractor: H-D OILFIELD SERVICE INC. License #: 32970

Address: P O BOX 87, BAZINE KS 67516

Name of Party Responsible for Plugging Fees: FALCON EXPLORATION INC.

State of KANSAS County, SEDGWICK, ss.

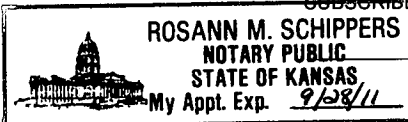
MICHEAL S MITCHELL (Employee of Operator) or (Operator) on above-described well, being first duty

sworn on oath, says: That I have knowledge of the facts statements, and matters herein contained, and the log of the above-described well is as filed, and the same are true and correct, so help me God.

(Signature) [Signature]

(Address) 125 N. MARKET, SUITE 1252, WICHITA KS 67202

SUBSCRIBED and SWORN TO before me this 1ST day of JULY, 20 09



Rosann M Schippers My Commission Expires: 9/28/11 Notary Public

Mail to: KCC - Conservation Division, 130 S. Market - Room 2078, Wichita, Kansas 67202

[Handwritten initials]