3

15-037-01281-00-00

To:

STATE CORPORATION COMMISSION

Wichita State Office Bldg. - PLUGGING SECTION

130 S. Market, Room 2078
Wichita, Kansas 67202

TECHNICIAN'S PLUGGING REPORT

Operator License # 101

Operator: STATE OF KANSAS Fee Funds

Name & _____

Address _____

AB oil well XXXX Gas Well _____ SWD Well/ Input Well _____ D & A _____

Other well as hereinafter indicated: _____

API NUMBER ~~N/A~~

SENWSE Sec/Twp/Rge 19 - 30S - 22E

GPS 1819 feet from south section line

GPS 1946 feet from east section line

Lease/Well# HUFF HUF12

County CRAWFORD

Well Total Depth 325 feet

Production Pipe: 3 Size Feet _____

Surface Casing: 6 Size Feet _____

Plugging Contractor: K-W OIL WELL SERVICE, INC Lic. # 3097

Address: 19450 FORD ROAD CHANUTE, KS

Company to plug at: Hour: _____ Day: 7 Month: 8 2007

Plugging proposal received from: JIM KEPLEY

Company Name: K-W OIL WELL SERVICE Phone: 620-431-2285

Were: _____

Plugging Proposal Received by: RUSSELL HINE

Plugging attended by Agent: All _____ Part XXXXX None _____ TECHNICIAN

Operations Completed: Hour: _____ Day: 7 Month: 8 2007

Actual Plugging Report: RAN 1' TO 325'

CIRCULATED CEMENT TO SURFACE.

22 SACKS OF PORTLAND USED

RECEIVED
OCT 29 2007
KCC WICHITA

ALTERNATE II COMPLETION

Remarks: CONTROL # 20070046-012

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

I DID observe this plugging.

Signed: Russell A Hine
TECHNICIAN

PKT