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

KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

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

Lease Operator: Mike Kelso Oil, Inc. API Number: ____15 - 115-202110000 Firebaugh Address: P.O. Box 467 Chase, KS. 67524 Lease Name: Phone: (620) 938 -2943 ___ Operator License #: 31528 Well Number: Spot Location (QQQQ): Type of Well: Oil 4625 Feet from North / South Section Line (If SWD or ENHR) (Oil, Gas D&A, SWD, ENHR, Water Supply Well, Cathodic, Other) The plugging proposal was approved on: ___ Feet from East / West Section Line by: Shane Jones _____ (KCC District Agent's Name) County: Marion Is ACO-1 filed? Yes No If not, is well log attached? Yes No Producing Formation(s): List All (If needed attach another sheet) Date Well Completed: 7-24-09 Depth to Top: ____ ___ Bottom: ___ Plugging Commenced: Depth to Top: ____ Bottom: ___ Plugging Completed: _ Depth to Top: __ _ Bottom: _ 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 8 5/8" 200' 5 1/2" 2340' 1017' 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. Sanded off bottom to 2200', dumped for sacks of cement. Cut casing loose at 1017'. Ran polypipe to 260', mixed 90 sacks cement and circulated to surface. **Plugging Complete** Name of Plugging Contractor: Mike Testing and Salvage, Inc.

License #: 31529 Address. P.O. Box 467 Chase, KS. 67524 Name of Party Responsible for Plugging Fees: Mike Kelso Oil, inc. State of Kansas _ County. Mike Kelso ____ (Employee of Operator) or (Operator) on 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 is as filed, and the same are true and correct, so help me God. (Address) P.O. Box 467 Chase.KKS. 67524 SUBSCRIBER and SWORN To before me this 6 day of August Notary Public My Commission Expires:____ NOTARY PUBLIC - State of Kansas IRENE HERZBERG My Appt. Exp.

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

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