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 - 115-191140000 Haefner Address: P.O. Box 467 Chase, KS. 67524 Lease Name: Phone: (620) 938 - 2943 ____ Operator License #: 31528 Well Number: - NW Type of Well: Oil Spot Location (QQQQ): _ (Oil, Gas D&A, SWD, ENHR, Water Supply Well, Cathodic, Other) (If SWD or ENHR) Feet from North / V South Section Line The plugging proposal was approved on: __ _(Date) Feet from 🗸 East / 🗌 West Section Line (KCC District Agent's Name) by: Shane Jones County:___ Is ACO-1 filed? Yes No If not, is well log attached? Producing Formation(s): List All (If needed attach another sheet) Date Well Completed: Depth to Top: __ _ Bottom: _ 7-15-09 Plugging Commenced: Bottom: Depth to Top:_ 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 Pulled Out Put In 8 5/8" 200' 4 1/2" 2370' 896' 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. Plugged off bottom with sand to 2300' and dumped 5 sacks cement. Cut casing loosing at 896'. Ran polypipe to 250", mixed 80 sacks of 60/40 pos 4% gel cement and circulated to surface. Tagged cement 144', mixed 35 sacks of cement and circulated to surface. **Plugging Complete** Name of Plugging Contractor: Mike Testing and Salvage, Inc. Address: P.O. Box 467 Chase, KS. 67524 Name of Party Responsible for Plugging Fees: Mike Kelso Oil, Inc. State of Kansas 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, KS. 67524 SUBSCRIBED and SWORN TO before me this _____day of _August __ My Commission Expires: _ NOTARY PUBLIC - State of Kansas IRENE HERZBERG

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