



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

KANSAS CORPORATION COMMISSION 1032390
OIL & GAS CONSERVATION DIVISION
WELL PLUGGING RECORD
K.A.R. 82-3-117

Form CP-4
March 2009
Type or Print on this Form
Form must be Signed
All blanks must be Filled

OPERATOR: License #: 4767
Name: Ritchie Exploration, Inc.
Address 1: 8100 E 22ND ST N # 700
Address 2: BOX 783188
City: WICHITA State: KS Zip: 67278 + 3188
Contact Person: Peter Fiorini
Phone: (316) 691-9500
Type of Well: (Check one) Oil Well Gas Well OG D&A Cathodic
 Water Supply Well Other: _____ SWD Permit #: _____
 ENHR Permit #: _____ Gas Storage Permit #: _____
Is ACO-1 filed? Yes No If not, is well log attached? Yes No
Producing Formation(s): List All (If needed attach another sheet)
LKC Depth to Top: 3766 Bottom: 3918 T.D. 4010
_____ Depth to Top: _____ Bottom: _____ T.D. _____
_____ Depth to Top: _____ Bottom: _____ T.D. _____

API No. ~~15~~-15-179-20625-00-00
Spot Description: _____
S2 N2 N2 SE Sec. 27 Twp. 8 S. R. 26 East West
3,080 Feet from North / South Line of Section
1,320 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Sheridan
Lease Name: ROBBEN P Well #: 5
Date Well Completed: 11/14/1981
The plugging proposal was approved on: 9/30/2009 (Date)
by: Darrel Dipman (KCC District Agent's Name)
Plugging Commenced: 9/30/2009
Plugging Completed: 9/30/2009

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

Oil, Gas or Water Records		Casing Record (Surface, Conductor & Production)			
Formation	Content	Casing	Size	Setting Depth	Pulled Out
LKC	Oil & Water	Surface	8.625	220	
		Production	4.50	4009	

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.

Pumped 150 sx 60/40 Pozmix cement w/ 4% Gel, and 250# hulls, down tubing. Pulled up, tubing plugged. Pumped out obstruction. Pumped 290 sx 60/40 Pozmix cement w/ 4% Gel and 250# hulls, down tubing. Cement circulated to surface. Pulled tubing out of hole. Pumped 40 sx 60/40 Pozmix cement w/ 4% Gel down casing, remained full. Pumped 50 sx 60/40 Pozmix cement w/ 4% Gel down 8.625" surface casing. Plugging compete at 9:00 p.m. approved by Darrel Dipman with the KCC.

Plugging Contractor License #: 99996 Name: ALLIED CEMENT COMPANY
Address 1: 612 N CLAY AVE Address 2: _____
City: MEDICINE LODGE State: KS Zip: 67104 + _____
Phone: (620) 793-5861
Name of Party Responsible for Plugging Fees: Ritchie Exploration, Inc.
State of Kansas County, Sedgwick, ss. _____
Peter Fiorini Employee of Operator or Operator on above-described well.
(Print Name)

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 was filed, and the same are true and correct, so help me God.

Submitted Electronically

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

RECEIVED
OCT 27 2009
KCC WICHITA