STATE OF KANSAS STATE CORPORATION.	COMMISSION	WELL PLUGGING RECORD			I NUMBER N/A
200 Colorado Derby Wichita, Kansas 6	Building				ASE NAME Bartos
Wichitian idinone		TYPE OR PRINT PLEASE FILL OUT COMPLETELY		y WE	LL NUMBER 3
		AND MAKE REQUIRED AFFIDAVIT.			OT LOCATION NW, NE, NW
LEASE OPERATOR Heartland Enterprises					C. <u>10</u> TWP. <u>10</u> RGE. <u>21</u> (EXOR(W)
ADDRESS 353 F Street, Phillipsburg, Ks 67661					UNTY Graham
PHONE #(913) 543-2166 OPERATORS LICENSE NO. 8128					TE WELL COMPLETED 5-25-51
					UGGING COMMENCED 12-20-85
CHARACTER OF WELLOIL (OIL, GAS, D&A, SWD, INPUT, WATER SUPPLY WELL)					UGGING COMPLETED 12-20-85
DID YOU NOTIFY THE KCC/KDHL JOINT DISTRICT OFFICE PRIOR TO PLUGGING THIS WELL? yes					
WHICH KCC/KDHE JOINT OFFICE DID YOU NOTIFY? Hays, Kansas					
Is ACO-1 FILED? no IF NOT, IS WELL LOG ATTACHED? none-available - Was used by Skelly Oil Company					
PRODUCING FORMATION Arbuckle & LKC DEPTH TO TOP 3528 est BOTTOM 3848 T.D. 3855					
SHOW DEPTH AND THI	CKNESS OF ALL WATE	ER, OIL AND G	AS FORMAT	IONS.	
OIL, GAS OR WATER RECORDS CASING RECORD					
FORMATION.	Content	FROM TO	SIZE	PUT IN	PULLED OUT
Surface	shale& sand	- 5' 295	8 5/8	290	none
top arb. & LKC	Dôlomite & lime	ground 38	5 5 5 5 "	3850 '	none
			LIAC BLUGG	TAIDICA	TANG MUEDE
DESCRIBE IN DETAIL THE MANNER IN WHICH THE WELL WAS 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 AND DEPTH PLACED, FROM FEET TO FEET EACH SET. Pumped 100 sks 60%common-40% Poz,6% gel					
3% CC between surface pipe & production string. Pumped 25 sks cement, 15 sks gel with 1 sk cottonseed hulls, 125 sks cement to surface. Max. PSI 1200 lb., closed in PSI 800 lb.					
1 SK COLLONSeed Mails, 12) SKS Cement to Saliace. Max. 151 1200 15., Closed in 151 Coo 15.					
(IF ADDITIONAL DESCRIPTION IS NECESSARY, USE BACK OF THIS FORM.)					
NAME OF PLUGGING CONTRACTOR Allied Cementing LICENSE No. N/A ADDRESS Russell, Kansas 67655					
/ DRESS					
STATE OF Kansas	C	OUNTY OF G	raham		,ss.
Stephen P. Me				OVEE OF O	
Stephen P. Morrison (EMPLOYEE OF OPERATOR) OR (OPERATOR) OF 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 AS FILED THAT THE SAME ARE TRUE AND					
CORRECT, SO HELP ME GOD.					
(SIGNATURE) LEGION Y. MANUSON					
(ADDRESS) Box 128, Gainesville, Mo 6565 Ph 417-679-3550					
SUBSCRIBED AND SWORN TO BEFORE ME THIS 28 DAY OF January 1986					

Carolyn S. Morrison
NOTARY PUBLIC
State of Kansas
ADDRES / 2-21-87

TY COMMISSION EXPIRES: December 21, 1987

Form CP-4 REVISED 06-83

STATE OF STA

01-31-86