

STATE OF KANSAS
STATE CORPORATION COMMISSION
200 Colorado Derby Building
Wichita, Kansas 67202

WELL PLUGGING RECORD
K.A.R.-82-3-117

API NUMBER 15-065-20,686-0001

LEASE NAME Page

WELL NUMBER 4

TYPE OR PRINT
NOTICE: Fill out completely
and return to Cons. Div.
office within 30 days.

1320 Ft. from S. Section Line

1320 Ft. from E Section Line

SEC. 24 TWP. 10 RGE. 24 (E) or (W)

COUNTY Graham

LEASE OPERATOR Murfin Drilling Company, Inc.

ADDRESS 250 N. Water, Suite 300 Wichita, KS 67202

PHONE#(913) 674-2103 OPERATORS LICENSE NO. 30606

Character of Well Injection

(Oil, Gas, D&A, SWD, Input, Water Supply Well)

Date Well Completed N/A

Plugging Commenced 12/9/93

Plugging Completed 12/9/93

The plugging proposal was approved on 12/9/93 (date)

by Carl Goodrow (KCC District Agent's Name).

Is ACO-1 filed? N/A If not, Is well log attached? _____

Producing Formation LKC Depth to Top 3791 Bottom 3844 T.D. 4004

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

OIL, GAS OR WATER RECORDS

CASING RECORD

Formation	Content	From	To	Size	Put In	Pulled out
LKC	Water	3791	3844			
				8 5/8	166	0
				5 1/2	4019	0

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 down 5 1/2" casing with 400 sacks 60-40 Poz, 8% gel, 500# hulls.
Max PSI 300 psig, ISIP 100 psig. 8 5/8 has cement up to 2" connection on
bradenhead.

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

Name of Plugging Contractor _____ License _____

Address _____

NAME OF PARTY RESPONSIBLE FOR PLUGGING FEES: _____

STATE OF _____ COUNTY OF _____, ss.

(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) John Gustafson

(Address) P.O. 130 Hillcity KS



BEFORE AND SWORN TO before me this 13 day of Dec, 19 93

Donna Gerstner
Notary Public

My Commission Expires: 6-24-97

