15-065-20538-00-00 ,STATE OF KANSAS WELL PLUGGING RECORD API NUMBER 15-065-20,538 STATE CORPORATION COMMISSION K.A.R.-82-3-117 200 Colorado Derby Building LEASE NAME Griffith Wichita, Kansas 67202 WELL NUMBER "C" 1 TYPE OR PRINT NOTICE: Fill out completely and return to Cons. Div. office within 30 days. LEASE OPERATOR Ritchie Exploation, Inc. ADDRESS 125 N. Market #1000 Wichita, Ks. 67202 COUNTY Graham PHONE# (316) 267-4375 OPERATORS LICENSE NO. 4767 Date Well Completed Character of Well SWD Plugging Commenced 4-20-90Plugging Completed 5-1-90(Oil, Gas, D&A, SWD, Input, Water Supply Well) The plugging proposal was approved on Is ACO-1 filed? If not, is well log attached? Producing Formation _____ Depth to Top_____ Bottom _____T.D. 4300' 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 8 5/8" 1731 none 5 1/2" 4030' 944'

Ft. from S Section Line Ft. from E Section Line SEC. 15 TWP10S RGE22W xkE)or(W) (KCC District Agent's Name). 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. Sanded bottom to 3980' dumped 5 sacks cement. Shot pipe @2420, 1230', 930'. Plugged with 150 sacks ATL, 5 hulls. (If additional description is necessary, use BACK of this form.) Name of Plugging Contractor KELSO CASING PULLING, INC. License No. 6050 Address P.O. Box 347 Chase, Kansas 67524 NAME OF PARTY RESPONSIBLE FOR PLUGGING FEES: Ritchie Exploration, Inc. STATE OF Kansas COUNTY OF Rice ,ss. R. Darrell Kelso (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) Khannel Sto STATE .. RECOUNTS (Address) P.O. Box 347 Chase, KS. 67524 MANAGRICA SUBSCRIBED AND SWORN TO before me this 13 day of June ____,19 90 CONSERVATION INCOMMISSION Expires:____

IRENE HERZBERG State of Kansas My Appt. Exp. Aug. 24, 1993

Form CP-4 Revised 05-88