STATE OF KANSAS STATE CORPORATION COMMISSION 130 S. MARKET, ROOM 2078

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

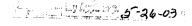
TYPE OR PRINT

api number Lease name	15-167-21, 148 -00 -00				
	Reich "D"				
	3				

WICHITA, KS 67202		NOTICE: Fill out Completely and return to coms. div. office within 30 days.			2540		ft. from S Section Line ft. from E Section Line
LEASE OPERATOR	Shields Oil Producers	s, Inc.			SEC. 22	TWP. 11	RGE. 15 (E) or (W
01:1.1.	Bldg., Russell, KS 67	***		· · · · · · · · · · · · · · · · · · ·	COUNTY R	ussell	
- DDLL00				5184	Date Well Co	mpleted	
FROME # (*** / OPERATOR'S LICENSE NO					Plugging Commenced 8/20/01		
Character of well Oil			-		Plugging Con		8/20/01
(Oil, Gas, D&A, SWD, i	input, Water Supply Well)				r lagging con	···pictou	Annie de la companya
The plugging proposal wa	s approved on 8/2	0/01					(date
by Herb Deines							(XCC District Agent's Name
s ACO-1 filed?	yes if not, is v	vell log attached	d?	not availal	ole to us		
Producing Formation —		Depth to Top _			Bottom		T.D. 3271
Show depth and thickness OIL, GAS OR WATER	s of all water, oil and gas for	mations			NG RECORD		
Formation	Content	From	То	Size	Put in	Pulled o	ut
							
				8 5/8	250	none	
				4 1/2	3268	none	
NATION NEEDS TERMEDIAL MANAGEMENT OF THE STATE OF THE STA							
placed and the m were used, state t	the manner in white thod or methods the character of san tumped 50 sacks ceme	used in int ne and dep	roducing oth plac	it into t ced, from	he hole. I <u>f</u> eet	f cement to	t or other plugs _feet each set
					- · · · · · · · · · · · · · · · · · · ·		
				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		-27-0	1
				3 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2			
Name of Plugging Contra	ctor Quality Well Serv	rice, Inc.			License	No. 319	25
Address 401 V	Vest Main, Lyons, KS 6	37554	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·		 	
NAME OF PARTY RESPO	NSIBLE FOR PLUGGING F	EES: Shie	lds Oil P	roducers, In	c.		
STATE OF KANSA	\ 5	COUN	ITY OF _	RUSSEL	ــــــــــــــــــــــــــــــــــــــ		. S S.
		MAN		(or) or (Operator) of
	well, being first dul natters herein conta	y sworn o	n oath,	says : Tha	at I have	knowled	ge of the facts
the same are true	e and correct, so he	elp me Go	d.	(Signature)	Josh P	. Beer	vau
				(Address)	Box 704	RUSS	ELL, KS 67665
SUBS	CRIBED AND SWORN TO	before me	34 th	day of	auses	t	ELL, KS 67665
				, .	// //		

hellyse Notary Public

Form CP-4 Revised 05-88



My commission Expires: