

STATE OF KANSAS
STATE CORPORATION COMMISSION
130 S. Market, Room 2078
Wichita, KS 67202

WELL PLUGGING RECORD
K.A.R.-02-3-117

API NUMBER 15-051-05749-0000

LEASE NAME M.P. Cress

WELL NUMBER 1
990 ^{RTKCC} N
330 Ft. from 6 Section Line

330 Ft. from W Section Line

SEC. 18 TWP. 11 SRGE. 16 (E) or (W)

COUNTY Ellis

Date Well Completed 1937

Plugging Commenced 5-8-00

Plugging Completed 5-11-00

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

LEASE OPERATOR Resource Operations, Inc.

ADDRESS P.O. Box 466 Chase, Kansas 67524

PHONE (316) 938-2982 OPERATORS LICENSE NO. 30364

Character of Well Oil

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

The plugging proposal was approved on _____ (date)

by Marvin Miller (KCC District Agent's Name)

Is ACO-1 filed? _____ If not, is well log attached? _____

Producing Formation _____ Depth to Top _____ Bottom T.O. 3425'

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
				9-5/8"	1112'	None
				7"	3411'	1600'

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 side. Plugged off bottom with sand to 3000' and 7 sks. cement. Shot pipe @1600', pulled up to 1200', pumped 140 sks. cement and 300# hulls, pulled to 650', pumped 50 sks. cement, pulled to 150' and circulated 50 sks. to surface. 60/40 pos, 10% gel. Pulled rest of casing.
Plugging Complete

Name of Plugging Contractor Mike's Testing & Salvage, Inc. License No. 31529

Address P.O. Box 467 Chase, Kansas 67524

NAME OF PARTY RESPONSIBLE FOR PLUGGING FEES: Resource Operations, Inc.

STATE OF Kansas COUNTY OF Rice, ss.

Mike Kelso (Employee of Operator)

above-described well, being first duly sworn on oath, says: That I have knowledge of the facts stated, and matters herein contained and the log of the above-described well as filed to the same are true and correct, so help me God.

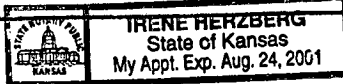
(Signature) Mike Kelso

(Address) P. O. Box 467 Chase, KS 67524

SUBSCRIBED AND SWORN TO before me this 18th day of May 2000

Irene Herzberg
Notary Public

My Commission Expires:



Form CP
Revised 05-