

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

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

API NUMBER 051-24, 645-0000
LEASE NAME Cress Estate
WELL NUMBER 1-18

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

1650 Ft. from S Section Line
330 Ft. from E Section Line

LEASE OPERATOR Mays Drilling Co.
ADDRESS P.O. Box 62, Great Bend, KS 67530
PHONE#(316) 792-1255 OPERATORS LICENSE NO. 30348

SEC. 18 TWP. 11S RGE. 16 (E) or (W)
COUNTY Ellis

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

Date Well Completed 4-16-90
Plugging Commenced 4-16-90
Plugging Completed 4-16-90

The plugging proposal was approved on 4-16-90 (date)
by Dennis Hamel (KCC District Agent's Name),

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

Producing Formation N/A Depth to Top _____ Bottom _____

STATE CORPORATION COMMISSION
RECEIVED 3370
JUN 27 1990
CONSERVATION DIVISION
Wichita, Kansas

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 |
|-----------|---------|------|-----|-------|--------|------------|
| | | -0- | 229 | 8-5/8 | x | |
| | | | | | | |
| | | | | | | |
| | | | | | | |

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.

1st @ 3320' w/25 sx 15 sx in cathole
2nd @ 1000' w/25 sx
3rd @ 550' w/125 sx Plugged with 200 sx 60/40Poz 6% gel & 1/4# sx floreal
4th 40' w/10 sx

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

Name of Plugging Contractor Mays Drilling Co. License No. 30348

Address P.O. Box 62, Great Bend, KS 67530

NAME OF PARTY RESPONSIBLE FOR PLUGGING FEES: Mays Drilling Co.

STATE OF Kansas COUNTY OF Barton, ss.

Sam W. Mays, Jr. (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) [Signature]
(Address) P.O. Box 62, Great Bend, KS 67530

SUBSCRIBED AND SWORN TO before me this 26th day of June, 19 90.

Melva L. Shell
Melva L. Shell Notary Public

My Commission Expires: 10-13-92