Notice: Fill out COMPLETELY and return to Conservation Division at the address below within 60 days from plugging date.

Kansas Corporation Commission Oil & Gas Conservation Division

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

Form CP-4 March 2009 Type or Print on this Form Form must be Signed All blanks must be Filled

OPERATOR: License #:5205				API No. 15 - 035242721/7 ~ 00~ 00			
Name: Mid-Continent Energy Corp.				Spot Description:			
Address 1: 105 S. Broadway, Suite 360				<u>sw</u> _ <u>ne</u> _ <u>ne</u> _ _{Sec.} 7 _{Twp.} 33 _{S. R.} 8 ✓ East west			
Address 2:				967 Feet from North / South Line of Section			
City: Wichita State: KS Zip: 67205 +				841 Feet from Feat / West Line of Section			
Contact Person: Jack Buehler				Footages Calculated from Nearest Outside Section Corner:			
Phone: (316_) _265-9501				✓ NE NW SE SW			
Type of Well: (Check one) ✓ Oil Well Gas Well OG D&A Cathodic				County:	Cowley		
Water Supply Well Other: SWD Permit #:				Lease Name: Folsum Well #: 1			
ENHR Permit #: Gas Storage Permit #: Is ACO-1 filed? ✓ Yes No If not, is well log attached? ✓ Yes ✓ No				Date Well Completed:			
Producing Formation(s): List All (If needed attach another sheet)				The plugging proposal was approved on: 6/29/2010 (Date)			
Depth to Top: <u>2598</u> Bottom: <u>2601</u> T.D. <u>2690</u>				by: David Bollenback (KCC District Agent's Name)			
Depth to Top: <u>2600</u> Bottom: <u>2603</u> T.D. <u>2690</u>				Plugging Commenced: 8/4/2010			
Depth to Top: Bottom: T.D				Plugging Completed: 8/10/2010			
					L		
Show depth and thickness of a	all water, oil and gas forma	ations.					
Oil, Gas or Water Records Casing				Record (Surface, Conductor & Production)			
Formation	Content	Casing	Size		Setting Depth	Pulled Out	
		Surface	8 3/8		45	0	
		Deaduction	4 4 10		0000	4000	
		Production	4 1/2		2690	1200	
cement or other plugs were us Sand back to 2550 circulate 173 sacks	ed, state the character of ', dump 4 sacks	same depth placed from (bott cement with dump	om), to (top) for each	plug set.	come up to 500', RECEIVED AUG 1 6 2010	
						AUU 1 0 2010	
5105						KCC WICHITA	
Plugging Contractor License #: Clarke Corporation Na				Mark M	orgenstern	1100 1111111	
Address 1: P.O. Box 187 Address				₂ . 107 V	V. Fowler		
City: _Medicine Lodge							
Phone: (620_) _ 886-5665				State. 1XD	· wa	2ip. <u>OF 10 T</u>	
Name of Party Responsible for		Continent Energy Cor					
		7 a ula a u					
State of Kansas County, Barber							
Mark Morgenstern (Print Name)				Employee of Operator or Operator on above-described well,			
being first duly sworn on oath, s the same are true and correct, Signature:					ained, and the log of t	he above-described well is as filed, and	