

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

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

API NUMBER 15-109-20,563 -00-00

RECEIVED

SEP 03 2002  
09-03-2002  
KCC WICHITA

TYPE OR PRINT

NOTICE: Fill out completely  
and return to Cons. Div.  
office within 60 days.

LEASE NAME LADENBURGER

WELL NUMBER #1 (SW NE SW)

1650 Ft. from S Section Line

1650 Ft. from W Section Line

LEASE OPERATOR John O. Farmer, Inc.

SEC. 7 TWP. 13S RGE. 33 XXXXXX (W)

ADDRESS P.O. Box 352, Russell, KS 67665

COUNTY Logan

PHONE# (785) 483-3144 OPERATORS LICENSE NO. 5135

Date Well Completed 4-29-94

Plugging Commenced 9:15 A.M., 8-23-02

Plugging Completed 10:45 A.M., 8-23-02

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

The plugging proposal was approved on \_\_\_\_\_ (date)  
by Herb Deenes (District #4) \_\_\_\_\_ (KCC District Agent's Name).

is ACO-1 filed? Yes If not, is well log attached? \_\_\_\_\_

Producing Formation Johnson Zone Depth to Top 4468' Bottom 4566' T.D. 4610'

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
Johnson Zone	oil & water	4510'	4514'	8-5/8"	270'	-0-
Johnson Zone	oil & water	4470'	4490'	4-1/2"	4597'	-0-

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.

Mixed 40 sks. cement w/500# hulls followed by 16 sks. gel & 95 sks. cement. Maximum pressure - 500#. Shut in @ 500#.

Hooked on backside; mixed 10 sks. cement - pressured to 200#. Released pressure.

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

Name of Plugging Contractor Allied Cementing Company, Inc. License No. \_\_\_\_\_

Address P.O. Box 31, Russell, KS 67665

NAME OF PARTY RESPONSIBLE FOR PLUGGING FEES: John O. Farmer, Inc.

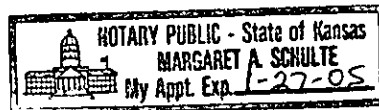
STATE OF Kansas COUNTY OF Russell, ss.

John O. Farmer III XXXXXXXXXXXXXXXXXXXXXXXXXXXX (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) John O. Farmer III

(Address) P.O. Box 352, Russell, KS 67665

SUBSCRIBED AND SWORN TO before me this 29th day of August, 20 02



Margaret A. Schulte  
Notary Public  
Margaret A. Schulte

Form CP-4  
Revised 05-88

CP