

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

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

API NUMBER 15-109-20,663-00-00

LEASE NAME McGuire

WELL NUMBER 1-25

330 Ft. from <sup>N</sup> Section Line

2450 Ft. from E Section Line

SEC. 25 TWP. 14 SRGE. 33 (E) or (W)

COUNTY Logan

Date Well Completed 11-26-97

Plugging Commenced 11-25-97

Plugging Completed 11-28-97

**CONFIDENTIAL**

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

LEASE OPERATOR Mull Drilling Company, Inc.

ADDRESS 221 N. Main, Suite #300, Wichita, KS 67201

PHONE# (316) 264-6366 OPERATORS LICENSE NO. 5144

Character of Well D/A

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

The plugging proposal was approved on 11-25-97 (date)

by Herb Dines (KCC District Agent's Name).

Is ACO-1 filed? Enclosed if not, is well log attached? \_\_\_\_\_

Producing Formation \_\_\_\_\_ Depth to Top \_\_\_\_\_ Bottom \_\_\_\_\_ T.O. \_\_\_\_\_

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
				8 5/8"		None

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 plug were used, state the character of same and depth placed, from feet to feet each set. Fill with heavy mud. 1st plug from 2150'-2050' with 25 sks, 2nd plug from 1000'-600' with 100' sks, 3rd plug from 275'-115' with 40 sks, 4th plug from 40'-0' with 10 sks, 15 sks in rat hole. Total of 190 sks 60/40 pos, 6% gel, 174# floseal per sk.

Name of Plugging Contractor Abercrombie RTD, Inc. License No. 30684

Address 150 N. Main, Suite 801, Wichita, KS 67202

RECEIVED  
STATE CORPORATION COMMISSION

NAME OF PARTY RESPONSIBLE FOR PLUGGING FEES: \_\_\_\_\_

STATE OF Kansas COUNTY OF Sedgwick, ss.

01-14-98  
JAN 14 1998

Scott Hampel, Vice President Production & Engineering (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) Scott Hampel

(Address) P.O. Box 2758, Wichita KS 67201

SUBSCRIBED AND SWORN TO before me this 12th day of January, 19 98

TANNIS L. TRITT  
Notary Public - State of Kansas  
My Appt. Expires 3-26-99

Tannis L. Tritt  
Notary Public

My Commission Expires: March 26, 1999