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

Signature: _

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 #:3842	API No.	API No. 15 - 101-21968-00-00			
Name: Larson Engineering, Inc.		Spot Description: W2 E2 SW4			
Address 1: 562 West State Road 4			Sec. 33 Twp. 16 S. R. 27 East West 1.300 Feet from North / South Line of Section 1,550 Feet from East / West Line of Section Footages Calculated from Nearest Outside Section Corner: NE NW SE SW County: Lane Lease Name: Anderson Well #: 1-33 Date Well Completed:		
Address 2:					
City: Olmitz State	561				
Contact Person: Thomas Larson	Footages				
Phone: (620) 653-7368					
Type of Well: (Check one) Oil Well Gas W	I COUNTY				
Water Supply Well Other:	i Lease Na				
ENHR Permit #: G Is ACO-1 filed? ✓ Yes No If not,					
Producing Formation(s): List All (If needed attach a					
Depth to Top:		Plugging Commenced: 12/10/05 Plugging Completed: 12/10/06			
Depth to Top:	Plugging				
Depth to Top:	Plugging				
	<u> </u>				
Show depth and thickness of all water, oil and gas	s formations.				
Oil, Gas or Water Records Casing Reco			Record (Surface, Conductor & Production)		
Formation Content	Casing	Size	Setting Depth	Pulled Out	
	surface	8-5/8"	249'	none	
Describe in detail the manner in which the well is cement or other plugs were used, state the chara 50 sx @ 2160', 80 sx @ 1320', 50 sx @ Plugged with 255 sx 60-40 poz w/ 6%	cter of same depth placed from (b @ 660', 40 sx @ 270', 20 sx	oottom), to (top) for eac (@ 60', 15 sx in RI COMMISSION	ch plug set.		
30606	CONSERVATION	່່'`ັ Murfin	Drilling Co., Inc.	Z .	
Plugging Contractor License #: 30606	·	_ Name:	21g		
Address 1: 250 N. Water St., Suite 300		Address 2:			
City: Wichita		State: K	is	Zip: 67202 +	
Phone: (316) 267-3241					
Name of Party Responsible for Plugging Fees:	Larson Engineering, Inc.				
State ofKSCo	ounty, <u>Barton</u>	, sş.			
Carol Lar	[Employee of Operator or Operator on above-described well,			
(Print Ni being first duly sworn on oath, says: That I hays-k	•	and matters becale to	ontained and the less	f the above described well is as filed and	
the same are true and correct, so help me food.	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	, and matters flerent Cl	omanieu, and the log o	a ure above-bescribed well is as lited, 800	
Signature:	asel the	-	Secretary/Tre	easurer	
alulature.	<u>></u>		Joseph Charles		