

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

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

20235-00 01

API NUMBER 15-171-20,050001

LEASE NAME Harper

WELL NUMBER 1 OWWO

3680 Ft. from S Section Line

2310 Ft. from E Section Line

SEC. 32 TWP. 16 RGE. 34 (E12) (W)

COUNTY Scott

Date Well Completed _____

Plugging Commenced 03-04-98

Plugging Completed 03-04-98

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

LEASE OPERATOR Viking Resources, Inc.

ADDRESS 105 S. Broadway 1040 Wichita, KS 67202-4224

PHONE (316) 262-2502 OPERATORS LICENSE NO. 5011

Character of Well Oil

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

The plugging proposal was approved on 03-04-98

by Kevin Strube

(KCC District Agent's Name)

Is ACO-1 filled? Yes If not, is well log attached? _____

Producing Formation _____ Depth to Top 4047' Bottom 4050' T.O. 4207'

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
	Surface	-0-	326	8 5/8"	326'	-0-
	Production	-0-	4182	4 1/2"	4182'	1100.50'

Describe in detail the manner in which the well was plugged, indicating where the plug was placed and the method or methods used in introducing it into the hole. If cement or other plugs used, state the character of same and depth placed, from feet to feet each. Allied pumped bottom plug and spot plugs on way out. Spot 50 sacks cement 60/40% 3% cc at 3500', shot pipe off at 1100', spot 80 sacks cement and pulled to 650', spot 50 sacks cement, pulled to 350', pumped 40 sacks cement and pulled to 40', circulated w/35 sacks cement. Maximum pressure 500 psi. Job started 8:00 a.m. and completed 1:30 p.m.

Name of Plugging Contractor DS&W Well Servicing, Inc. License No. 6901

Address P.O. Box 231 Claflin, KS 67525

NAME OF PARTY RESPONSIBLE FOR PLUGGING FEES: Viking Resources, Inc. Wichita, KS 67202-4224

STATE OF Kansas COUNTY OF Barton

Arthur P. Strube

(Employee of Operator) or (Operator)

above-described well, being first duly sworn on oath, says: That I have knowledge of the facts stated herein, and matters herein contained and the log of the above-described well as filed, and the same are true and correct, so help me God.

(Signature) Arthur P. Strube

(Address) P.O. Box 231 Claflin, KS 67525

SUBSCRIBED AND SWORN TO before me this 18 day of March, 1998

Brenda Urban
Notary Public

My Commission Expires Nov. 14, 2001
USE ONLY ONE SIDE OF EACH FORM

