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

WELL PLUGGING RECORD

API NUMBER 15-171-20,515-00-00 K.A.R.-82-3-117 LEASE NAME Brueggeman TYPE OR PRINT WELL NUMBER _____ CH-4 (C E/2 SW) NOTICE: Fill out completely and return to Cons. Div. 1320 Ft. from S Section Line office within 60 days. 1980 Ft. from W Section Line LEASE OPERATOR John O. Farmer, Inc. SEC. 23 TWP. 16S RGE. 32 XXXXXX (W) P.O. Box 352, Russell, KS 67665 COUNTY _____Scott PHONE# (785) 483-3144 OPERATORS LICENSE NO. 5135 Date Well Completed 9-10-97 Plugging Commenced Character of Well Corehole Plugging Completed 11:15 A.M., 9-10-97 (Oil, Gas, D&A, SWD, Input, Water Supply Well) The plugging proposal was approved on _____ 9-10-97 Richard Lacey, District #1 (KCC District Agent's Name). Is ACO-1 filed? Attached If not, is well log attached? Depth to Top ______ Bottom_____T.D.___780' Producing Formation Show depth and thickness of all water, oil and gas formations. OIL, GAS OR WATER RECORDS CASING RECORD Formation From l To Size Pulled out Content Put in 5-1/2" | 20' @ 23' 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. Spotted 30 sks. on bottom. Circulated 40 sks. from 400' to surface. Circulated 15 sks. through 5-1/2" casing. (Plugged from TD to surface, witnessed by Kevin Strube KCC District #1) (If additional description is necessary, use BACK of this form.) Name of Plugging Contractor Allied Cementing Company, Inc. License No._____ P.O. Box 31, Russell, KS 67665 Address NAME OF PARTY RESPONSIBLE FOR PLUGGING FEES: ______ John O. Farmer, Inc. STATE OF _____ Kansas ____ COUNTY OF ____ Russell ____,ss. John O. Farmer III 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. me God. (Signature) John towns III (Address) P.O. Box 352, Russell, K\$ 67665 SUBSCRIBED AND SWORN TO before me this _____13th___ day of_____October____ rest a.

NOTARY PUBLIC - State of Mansas

MARGARET A SCHULT

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Margaret A. Schulte

Form CP-4

Revised 05-88