

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 15-155-21,451 00-00

LEASE NAME Morgan Yeake! Unit

WELL NUMBER #1

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

2310 Ft. from S Section Line

4290 Ft. from E Section Line

SEC. 17 TWP. 22S RGE. 8W E W

COUNTY Reno

Date Well Completed 4/26/01

Plugging Commenced 2/5/02

Plugging Completed 2/8/02

LEASE OPERATOR McCoy Petroleum Corporation

ADDRESS 453 S. Webb Rd., Suite 310, Box 780208 Wichita KS 67278

PHONE # (316) 636-2737 OPERATORS LICENSE NO. 5003

Character of Well Oil

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

The plugging proposal was approved on 2/5/02 (date)

by Doug Louis (KCC District Agent's Name),

Is ACO-I filed? Yes If not, Is well log attached? Filed w/ACO-1

Producing Formation Mississippian Depth to Top 3524 Bottom 3560 T.D. 3625

Show depth and thickness of all water, oil and gas formations.

OIL, GAS OR WATER RECORDS

CASING RECORD

FEB 25 2002

Formation	Content	From	To	Size	Put In	Pulled out
Surface		0		8 5/8"	253'	None
Production casing				5-1/2"	3623'	2825'

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.

Sand at 3460', baled 5 sacks cement. Shot pipe at 2825', pulled 4 jts. Well blew out. Pulled to 1350', pumped 35 sacks cement.

Pulled to 900', pumped 35 sacks cement. Pulled to 300', circulated cement to surface. Pulled rest of pipe.

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

Name of Plugging Contractor Quality Well Service, Inc. License No. 31925

Address 410 West Main, Lyons, KS 67554

NAME OF PARTY RESPONSIBLE FOR PLUGGING FEES McCoy Petroleum Corporation

STATE OF Kansas COUNTY OF Sedgwick ss.

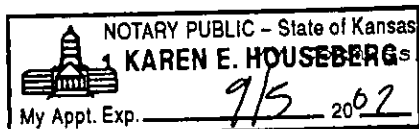
Scott Hampel (Employee of Operator) or (Operator) of above-described well, being first duly sworn on oath, says: That I have knowledge of the facts, statements, and matters herein contained and the log of the above-described well as filed that the same are true and correct, so help me God.

(Signature) Scott Hampel

(Address) 453 S. Webb Rd, Ste 310 Wichita KS 67278

SUBSCRIBED AND SWORN TO before me this 22nd day of February, 19 2002

Karen E. Houseberg
Notary Public



Expires September 5, 2002

OR