

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

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

API NUMBER 15-171-20,419-0000

LEASE NAME Treger "A"

WELL NUMBER 1

3960' Ft. from S Section Line

4620' Ft. from E Section Line

SEC. 36 TWP. 18S RGE. 32 XX or (W)

COUNTY Scott

Date Well Completed 1-9-91

Plugging Commenced 1-10-91 12:00AM

Plugging Completed 1-10-91 3:00AM

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

LEASE OPERATOR Slawson Exploration Company, Inc.

ADDRESS 104 S. Broadway, Suite 200, Wichita, KS 67202-4165

PHONE# (316) 263-3201 OPERATORS LICENSE NO. 3988

Character of Well D&A

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

The plugging proposal was approved on January 9, 1991 (date)

by Glen Barlow (KCC District Agent's Name).

Is ACO-1 filed? by operator If not, Is well log attached? yes

Producing Formation _____ Depth to Top _____ Bottom T.O. 4604'

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	390'	8 5/8"	390'	none

778 4 1991
2-14-91

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.

50 sx. @ 2300', 80 sx. @ 1400', 50 sx. @ 800', 50 sx. @ 420', 10 sx. @ 40', 15 sx. in rathole
Total 255 sx. 60/40 Pozmix, 6% Gel

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

Name of Plugging Contractor Allied Cementing License No. _____

Address Great Bend, KS. 67530

NAME OF PARTY RESPONSIBLE FOR PLUGGING FEES: Slawson Exploration Company, Inc.

STATE OF Kansas COUNTY OF Barton, ss.

Greg Davidson

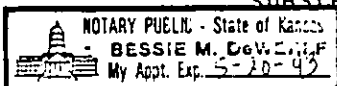
(Employee of Operator) or (~~Operator~~) of

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) Greg Davidson

(Address) Great Bend, Kansas 67530

SUBSCRIBED AND SWORN TO before me this 11th day of January, 1991



Bessie M. DeWerrf
Notary Public
Bessie M. DeWerrf

My Commission Expires: 5-20-93

EFFECTIVE DATE: 11-1-90

P.U.

FORM MUST BE TYPED
FORM C-1 4/90

State of Kansas
NOTICE OF INTENTION TO DRILL 171-20,419-~~0000~~ ALL BLANKS MUST BE FILLED

Must be approved by the K.S.C. five (5) days prior to commencing well

Expected Spud Date January 4 91
month day year

C W/2 NW/4 Sec 36 Twp 18 S R3 32 East West

3960' feet from South line of Section
4620' feet from East line of Section
(Note: Locate well on Section Plat on Reverse Side)

OPERATOR: License # 3988
Name: Slawson Exploration Company, Inc.
Address: 104 South Broadway, Suite 200
City/State/Zip: Wichita, Kansas 67202-4165
Contact Person: Robert B. Jenkins
Phone: (316) 263-3201

County: Scott
Lease Name: Treger "A" Well #: 1
Field Name: Wildcat

CONTRACTOR: License #: 6039
Name: L. D. Drilling, Inc.

Is this a Prorated Field? yes no
Target Formation(s): Mississippian
Nearest lease or unit boundary: 660'

Well Drilled For: Well Class: Type Equipment:
 Oil ... Inj ... Infield Mud Rotary
... Gas ... Storage ... Pool Ext. ... Air Rotary
... OWWO ... Disposal Wildcat ... Cable
... Seismic; ... # of Holes

Ground Surface Elevation: 2971' GR. (Seis) feet
Domestic well within 330 feet: yes no
Municipal well within one mile: yes no
Depth to bottom of fresh water: 110'
Depth to bottom of usable water: 1500'
Surface Pipe by Alternate: 1 2
Length of Surface Pipe Planned to be set: 365'
Length of Conductor pipe required: None
Projected Total Depth: 4650'
Formation at Total Depth: Mississippian

If OWWO: old well information as follows:
Operator: _____
Well Name: _____
Comp. Date: _____ Old Total Depth _____

Water Source for Drilling Operations:
... well ... farm pond ... other
DWR Permit #: water well applied for
Will Cores Be Taken?: yes no
If yes, proposed zone: _____

Directional, Deviated or Horizontal wellbore? yes no
If yes, total depth location: _____

200' Alt. II Req.

AFFIDAVIT

Exp. 5/19/91

The undersigned hereby affirms that the drilling, completion and eventual plugging of this well will comply with K.S.A. 55-101, et. seq.

Pusher SP. Coreg Davidson

SPUD DATE 12-29-90 INIT. R.C.

LENGTH SURFACE PLANNED 365 3

RESERVE PIT STATUS- REMOVE FLUID LINED
after salt sect. bbls. when done bbls.

RATHOLED AHEAD? Y N SIZE HOLE _____
SURFACE PIPE 5 1/2" @ 395 CONDUCTOR _____
ANHYDRITE T- B- ELEVATION 29

TD 44 04 FORMATION M.S.I

RAN PIPE @	DV TOOL	ALT II DONE
SX	SX	Y N
Arbuckle Plug @	Ft. W/	SX
Plug./Council @	Ft. W/	SX
<u>2304</u> Anhydrite Base @	<u>2300</u> Ft. W/	<u>50</u> SX
<u>1/2</u> Base Anhyd. @	<u>1400</u> Ft. W/	<u>80</u> SX
<u>1/2, 1/2</u> Plug @	<u>800</u> Ft. W/	<u>50</u> SX
Bottom Surface @	<u>420</u> Ft. W/	<u>50</u> SX
40' Plug @	40 Ft. W/	10 SX

RAT HOLE CIRC/W 15 SX MOUSE HOLE W/ _____ SX

WATER WELL NO SX (Irr. Well) Pond _____
Hauling _____

TECHNICIAN CS DATE 1-09-91

TYPE OF CEMENT 60-40p.s

STARTING TIME 1:00 (AM/PM) DATE 1-10-90

COMPLETION TIME 2:00 (AM/PM) DATE 1-10-90

CEMENT COMPANY A/Dee