

STATE OF KANSAS
STATE CORPORATION COMMISSION
S. Market, Room 2078
Wichita, KS 67202

WELL PLUGGING RECORD
K.A.R.-02-3-117

15-169-00822-00-01
API NUMBER Comp. 4-17-53

SEP 11 2002
KCC WICHITA

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

LEASE NAME Larson "B"

WELL NUMBER 7

2790 Ft. from S Section Line

4290 Ft. from E Section Line

SEC. 30 TWP. 15 RGE. 3W (E) or (W)

COUNTY Saline

Date Well Completed _____

Plugging Commenced 8-27-02

Plugging Completed 8-30-02

LEASE OPERATOR J.D. PRODUCTION

ADDRESS P.O. Box 254 Geneseo, Kansas 67444

PHONE (628) 824-6510 OPERATORS LICENSE NO. 8917

Character of Well SND FOR

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

Plugging proposal was approved on _____ (date)

by Doug Lewis (KCC District Agent's Name).

ACO-1 filed? _____ If not, is well log attached? _____

Producing Formation _____ Depth to Top _____ Bottom _____ T.D. 3450'

Give 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
				10"	361'	None
				6"	3450'	1927'

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 are used, state the character of same and depth placed, from _____ feet to _____ feet each side. Plugged off bottom with sand to 3345' and 7 sacks cement. Shot pipe @ 1927', laved down casing, bailed fluid to 415' and ran 8 yards of slurry mix. Plugging Complete.

Name of Plugging Contractor Mike's Testing & Salvage, Inc. License No. 31529

Address P.O. Box 467 Chase, Kansas 67524

NAME OF PARTY RESPONSIBLE FOR PLUGGING FEES: J.D. Production

STATE OF Kansas COUNTY OF Rice, ss.

Mike Kelso (Employee of Operator) or (Operator)

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

(Signature) Mike Kelso

(Address) P. O. Box 467 Chase, KS 67524

SUBSCRIBED AND SWORN TO before me this 9th day of September, 2002

Irene Herzberg Notary Public

My Commission Expires: _____

