

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

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

API NUMBER 15-101-21,806-06-00

LEASE NAME Sharp

WELL NUMBER 1

4290 Ft. from S Section Line

990 Ft. from E Section Line

SEC. 6 TWP. 17S RGE. 30 (E) or (W)

COUNTY Lane

Date Well Completed 11/30/02

Plugging Commenced 12/01/02

Plugging Completed 12/01/02

RECEIVED

DEC 20 2002

KCC WICHITA

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

LEASE OPERATOR Ritchie Exploration, Inc.

ADDRESS PO Box 783188 Wichita, KS 67278-3188

PHONE# (620) 691-9500 OPERATORS LICENSE NO. 4767

Character of Well _____

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

The plugging proposal was approved on December 1, 2002 (date)

by Steve Middleton (KCC District Agent's Name).

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

Producing Formation _____ Depth to Top _____ Bottom _____ T.O. 4615'

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
				8 5/8"	249'	none

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.
1st plug set at 2220' with 50 sacks of 60/40 poz, 6% gel, 2nd plug set at 1300' with 80 sacks, 3rd plug set at 700' with 40 sacks, 4th plug set at 270' with 40 sacks, 5th plug set at 40' with 10 sacks; 15 sacks in rat hole.

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

Name of Plugging Contractor Allied Cementing, Inc. License No. _____

Address PO Box 31 Russell, KS 67665

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

STATE OF Kansas COUNTY OF Sedgwick, ss.

John C. Niernberger (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) [Signature]

(Address) PO Box 783188 Wichita, KS 67278

SUBSCRIBED AND SWORN TO before me this 18th day of December, 192002

Karen Hopper

My Commission Expires: _____

KAREN HOPPER Notary Public
Notary Public - State of Kansas
My Appt. Expires 10/27/03

OR