STATE OF KANSAS STATE CORPORATION COMMISSION		-82-3-117	AP! NUM	BER 15-101-20,018 -00-01	
130 S. Market, Room 2078			LEASE N	LEASE NAME Miller N	
Nichita, KS ² _67202 TYPE OR PRINT			AETT NA	WELL NUMBER #2	
MOTICE: Fill out completely and return to Cons. Div. office within 30 days.			3300	3300 Ft. from S Section Line	
				Ft. from E Section Line	
LEASE OPERATOR Whitetail Crude, Inc				TWP. 175RGE. 27W (E) or (W)	
ADDRESS P 0 Box 544, Ness City, KS 67560-0544				Lanes	
PHONE # (785) 798-3641 OPERATORS LICENSE NO. 31627				II Completed 1/12/91	
Character of Well oil				g Commenced 11/28/00	
(OII, Gas, D&A, SWD, Input, Water Supply Well)				g Completed 11/30/00	
The plugging proposal was approved on $\frac{11/28/00}{}$ (date)					
by Mike Maier (KCC District Agent's Name).					
Is ACO-1 filed? Unknown If not, is well log attached? yes					
Producing Formation Lansing/Kansas CityOepth to Top 3949 Bottom 3954 T.D. 4010 CIBP					
Show depth and thickness of all water, oil and gas formations.					
OIL, GAS OR WATER RECORDS CAS			ASING RECO	RO	
Formation Content	From	To Size	Put In	Pulled out	
Describe in detail the manner	in which the we	il was plugged	, indicat	 Ing where the mud fluid w	
placed and the method or methods used in introducing it into the hole. If cement or other plu- were used, state the character of same and depth placed, from feet to feet each se					
11/28/00 Tagged bottom @ 3965 & sanded off perfs with 150 shovels of sand. 11/29/00 Tagged sand plug @ 3875, ran dump bailer and spotted 2 sacks of cement on top of sand plug. 11/30/00 Hooked					
up to 8 5/8 & took injection rate: 3.5 BPM. Pumped 175 sacks 60-40 6% gel down 8 5/8 max pressure					
250#, shut in 100 PSI. Hooked onto 5.5 & pumpe					
Name of Plugging Contractor Swift Service Inc DFC 5 2000 License No.					
Address P O Box 466, Ness City, KS 67560-0466					
CONSERVATION DIVISION NAME OF PARTY RESPONSIBLE FOR PLUGGING FEES: Withite Karishs Crude, Inc					
STATE OF Kansas	COUNTY OF	Ness		_,ss.	
Mike J. Fritzler, President of Whitetail Crude, Inc (Employee of Operator) or (Operator)					
above-described well, being first duly sworn on oath, says: That I have knowledge of the fact statements, and matters herein contained and the log of the above-described well as filed the the same are true and correct, so help measures.					
HOTARY PUBLIC - State of Kansas (Signature) Whitetail Cypide, Inc					
My Appt Exp. 1/2/1 (Address) P 0 Box 544. Ness City. KS 67560-0544					
SUBSCRIBED AND SWORN TO before me this 1st day of December 2000, kg					
M. Osmalasta	Eugless 4/20/	Debra Kerr	Nota	ery Public	
use only one side of ea	CH FORM	U.L.			