

STATE CORPORATION COMMISSION
Wichita, State Office Building
130 S. Market, Room 2078
Wichita, KS 67202

K.A.R.-82-3-1.7

15-169-00571-0000
API NUMBER 11-25-63

LEASE NAME Applequist B

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

WELL NUMBER 1

660 Ft. from S Section Line

2310 Ft. from E Section Line

SEC. 8 TWP. 16 RGE. 3 (E) or (W)

COUNTY Saline

LEASE OPERATOR Edwards Oil Properties

ADDRESS P O Box 961 McPherson, KS 67460

PHONE (316) 241-5813 OPERATORS LICENSE NO. 32495

Character of Well Oil

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

Date Well Completed 11-25-63

Plugging Commenced 8-29-00

Plugging Completed 8-30-00

The plugging proposal was approved on 8-29-00 (date)

by Ralph Tittel (KCC District Agent's Name).

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

Producing Formation Maquoketa Depth to Top 3374 Bottom 3378 T.D. _____

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

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 plug were used, state the character of same and depth placed, from _____ feet to _____ feet each set.
Moved in 8-29-00 at 10:00 a.m. Filled 5 1/2" casing with sand to 3270 feet
Capped with 5 sacks cement. Removed 450 feet of 5 1/2" casing. Solid Bridge
at 400 feet with 7 yards cement completed 8-30-00 at 1:00 pm

Name of Plugging Contractor Sunflower Well Service License No. 30280

Address 408 N 4th Canton, SK 67428

NAME OF PARTY RESPONSIBLE FOR PLUGGING FEES: Jack Edwards

STATE OF Kansas COUNTY OF McPherson, ss.

Jack Edwards (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 the same are true and correct, so help me God.

(Signature) [Signature]

(Address) P O Box 961 McPherson, KS 67460

SUBSCRIBED AND SWORN TO before me this 7th day of September, 19 2000

[Signature]
Notary Public

My Commission Expires: 12-02-01

USE ONLY ONE SIDE OF EACH FORM

