

LEASE NAME M.B. Jones

WELL NUMBER 1

2970 Ft. from S Section Line

2970 Ft. from E Section Line

SEC. 33 TWP. 16 RGE. 22 (E) or (W)

COUNTY Ness

Date Well Completed 09-18-93

Plugging Commenced 09-18-93

Plugging Completed 09-18-93

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

LEASE OPERATOR Ritchie Exploration, Inc.

ADDRESS 125 N. Market, Suite 1000 Wichita, KS 67202

PHONE# (316) 267-4375 OPERATORS LICENSE NO. 4767

Character of Well D&A

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

The plugging proposal was approved on 09-13-93 (date)
 by Steve Durant (KCC District Agent's Name).

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

Producing Formation _____ Depth to Top _____ Bottom _____ T.D. 4460'

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

Bottom Plug: @ 1740' w/50 sacks cement thru drill pipe 15 sacks in Rat Hole
 Next Plug: @ 840' w/80 " " " " "
 Next Plug: @ 290' w/40 " " " " "
 Top Plug: @ 40' w/10 " " " " "

Name of Plugging Contractor _____ License No. _____

Address _____

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

STATE OF Kansas COUNTY OF Sedgwick, ss.

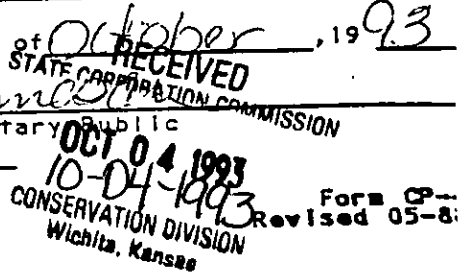
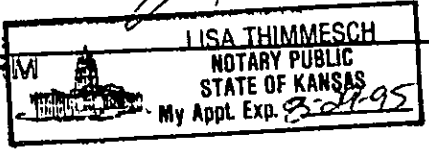
Ritchie Exploration, Inc. (Employee of Operator) or (Operator) of above-described well, being first duly sworn on oath, says: That I have knowledge of the facts statements, and matters herein contained and the log of the above-described well as filed the the same are true and correct, so help me God.

(Signature) [Signature]

(Address) 125 N. Market, Wichita, KS

SUBSCRIBED AND SWORN TO before me this 1st day of October, 1993

Lisa Thimmesch
 Notary Public



My Commission Expires _____
 USE ONLY ONE SIDE OF EACH FORM