

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

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

API NUMBER 15-135-20,640-00-00

LEASE NAME Norton "B"

WELL NUMBER 3

4620 Ft. from S Section Line

3450 Ft. from E Section Line

SEC. 12 TWP. 18 SRGE. 26W (E) or (W)

COUNTY Ness

Date Well Completed _____

Plugging Commenced 5-7-02

Plugging Completed 5-8-02

RECEIVED

MAY 14 2002

5-14-02

KCC WICHITA

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

OPERATOR PICKRELL DRILLING CO., INC.

ADDRESS 100 S. Main, Suite 505 Wichita, Kansas 67202

PHONE (316) 262-8427 OPERATORS LICENSE NO. 5123

Character of Well Oil

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

A plugging proposal was approved on _____ (date)

Michael Maiers (KCC District Agent's Name).

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

Producing Formation _____ Depth to Top _____ Bottom _____ T.D. 4496'

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"	252'	None
				5-1/2"	4481'	600'

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 side. Plugged off bottom with sand to 4420' and 5 sacks cement. Shot pipe @1220', pumped 80 sacks cement. shot pipe @600', pumped 40 sacks cement, pulled up to 290', pumped 50 sacks cement, pulled up to 40' and circulated 20 sacks cement to surface 60/40 pos, 6% gel. 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: Pickrell Drilling Co., Inc.

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

(Signature) [Signature]

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

SUBSCRIBED AND SWORN TO before me this 10th day of May, 2002

My Commission Expires: _____

