

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

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

API NUMBER 135-23218-0001

LEASE NAME Norton

WELL NUMBER #1

3630 Ft. from S Section Line

2970 Ft. from E Section Line

SEC. 36 TWP. 17S RGE. 26 (E) or (W)

COUNTY Ness

Date Well Completed 9/24/92

Plugging Commenced 9/24/92

Plugging Completed 9/24/92

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

LEASE OPERATOR Ranken Energy Corporation
ADDRESS 2325 S.W. 15th St. Edmond, OK 73013-2027

PHONE# (405) 340-2363 OPERATORS LICENSE NO. 3447

Character of Well D & A

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

The plugging proposal was approved on 9/23/92 (date)

by Dan Goodrow (KCC District Agent's Name).

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

Producing Formation None Depth to Top _____ Bottom _____ T.O. _____

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 |
|-----------|---------|------|----|------|--------|------------|
| | | | | | | 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 section.
Plugged with 245 sc 60-40 Poz w/8% gel & 600 lbs. of hulls in 1st 30 sx. Pressured to 500 lbs. Plugged down casing. Tied onto casing surface pipe annulus and pressured to 600 lbs - held.

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

Name of Plugging Contractor Halliburton Services License No. _____

Address P O Box 405, Ness City, KS 67560

RECEIVED
STATE CORPORATION COMMISSION
DEC 17 1992

NAME OF PARTY RESPONSIBLE FOR PLUGGING FEES: Ranken Energy Corporation

STATE OF OKLAHOMA COUNTY OF OKLAHOMA, ss.

Randolph L. Coy

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

(Signature) Randolph L. Coy

(Address) 2325 S. W. 15th St. Edmond, OK

73013

SUBSCRIBED AND SWORN TO before me this 15th day of December, 1992

Janet J. Tidholm
Notary Public

My Commission Expires: July 12, 1994

