

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

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

API NUMBER 15-171-20,396-0000

LEASE NAME Morrison "H"

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

WELL NUMBER 1

1980 Ft. from S Section Line

670 Ft. from E Section Line

SEC. 17 TWP. 18S RGE. 31 (R) or (W)

COUNTY SCOTT

Date Well Completed 11-23-89

Plugging Commenced 11-23-89 2:00AM

Plugging Completed 11-23-89 4:00AM

LEASE OPERATOR Slawson Exploration Company, Inc.

ADDRESS 104 S. Broadway, Wichita, Kansas 67202-4165

PHONE#(316) 263-3201 OPERATORS LICENSE NO. 3988

Character of Well D&A

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

The plugging proposal was approved on November 22, 1989 (date)

by Kace Morris (KCC District Agent's Name).

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

Producing Formation _____ Depth to Top _____ Bottom _____ T.D. 4578'

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
Surface		0	378	8 5/8"	378	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 set.

100 sx. @ 2800', 50 sx. @ 2290', 80 sx. @ 1420', 40 sx. @ 410', 10 sx. @ 40', 15sx. in rat hole
Total 295 sx. 60/40 pozmix, 6% Gel

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

Name of Plugging Contractor Allied Cementing Company License No. _____

Address Russell, Kansas 67665

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

STATE OF Kansas COUNTY OF Barton, ss. _____

Greg Davidson (Employee of 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 that the same are true and correct, so help me God.

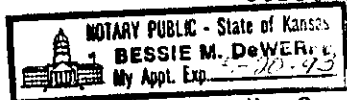
(Signature) Greg Davidson

Greg Davidson

(Address) Great Bend, Kansas 67530

COPY

SUBSCRIBED AND SWORN TO before me this 28th day of November, 19 89



My Commission Expires: 5-20-93

Notary Public

Bessie M. DeWerff

RECEIVED
STATE CORPORATION COMMISSION
11-22-1990
1-22-90
CONSERVATION DIVISION
Wichita, Kansas

Must be approved by the K.C.C. five (5) days prior to commencing well

Expected Spud Date ... October ... 31 ... 1989 ... ~~150~~ E NE SE Sec 17 Twp 18 S, Rg 31 X East West

OPERATOR: License # 3988
Name: SLAWSON EXPLORATION COMPANY, INC.
Address: 104 South Broadway, Suite 200
City/State/Zip: Wichita, Kansas 67202-4165
Contact Person: James C. Remsburg
Phone: (316) 263-3201

1980' feet from South line of Section
670' feet from East line of Section
(Note: Locate well on Section Plat Below)

CONTRACTOR: License #: 6039
Name: L.D. DRILLING, INC.

County: SCOTT
Lease Name: MORRISON "H" Well #: 1
Field Name: Wildcat
Is this a Prorated Field? yes X no
Target Formation(s): Mississippian
Nearest lease or unit boundary: 510'
Ground Surface Elevation: 2945' GR. (Seis). feet MSL
Domestic well within 330 feet: yes X no
Municipal well within one mile: yes X no
Depth to bottom of fresh water: 160'
Depth to bottom of usable water: 1400'
Surface Pipe by Alternate: 1 X 2
Length of Surface Pipe Planned to be set: 375'
Length of Conductor pipe required: None
Projected Total Depth: 4675'
Formation at Total Depth: Mississippian
Water Source for Drilling Operations:
Scott City Water X well farm pond other
DWR Permit #:
Will Cores Be Taken?: yes X no
If yes, proposed zone:
200' Alt. 11 Req.

Well Drilled For: Well Class: Type Equipment:
X Oil ... Inj ... Infield X Mud Rotary
Gas ... Storage ... Pool Ext. ... Air Rotary
OWO ... Disposal X Wildcat ... Cable
Seismic; ... # of Holes

If OWO: old well information as follows:
Operator:
Well Name:
Comp. Date: Old Total Depth

Directional, Deviated or Horizontal wellbore? yes X no
If yes, total depth location:
Exp. 4/26/90

AFFIDAVIT

PUSHER _____
TD 4578 FORMATION _____
SURFACE PIPE @ _____
ANHYDRITE _____ ELEVATION _____
STARTING TIME & DATE 11-13-89
COMPLETION TIME & DATE 4-26-90
1st PLUG @ _____ FT. W/ SX
2nd PLUG @ _____ FT. W/ SX
3rd PLUG @ _____ FT. W/ SX
4th PLUG @ _____ FT. W/ SX
RAT HOLE CIRCULATED W/ _____ SX
MOUSE HOLE CIRCULATED W/ _____ SX
WATER WELL PLUGGED W/ _____ SX
CEMENT COMPANY _____
TECHNICIAN _____
TYPE OF CEMENT _____

Spud 11-13-89
375' of 8 5/8" haul out.

5280	1650
4950	1320
4620	990
4290	660
3960	330
3630	
3300	
2970	
2640	
2310	
1980	
1650	
1320	
990	
660	
330	

Spud date: _____ Agent: _____

- REMEMBER TO:
- File Drill Pit Application (form CDP-1) with Intent to Drill;
 - File Completion Form ACO-1 within 120 days of spud date;
 - File acreage attribution plat according to field prorations orders;
 - Notify appropriate district office 48 hours prior to workover or re-entry;
 - Submit plugging report (CP-4) after plugging is completed;
 - Obtain written approval before disposing or injecting salt water.