

LEASE NAME Donavan

WELL NUMBER C-1

1225 Ft. from S Section Line

670 Ft. from E Section Line

SEC. 10 TWP. 34 RGE. 13 (E or W)

COUNTY Barber

Date Well Completed _____

Plugging Commenced 1-22-96

Plugging Completed 1-24-96

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

LEASE OPERATOR Woolsey Petroleum

ADDRESS 107 N. Market, Wichita, KS 67202

PHONE# (316) 267-4379 OPERATORS LICENSE NO. 5506

Character of Well good

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

The plugging proposal was approved on 1/22/96 (date)

by Richard Lacy (KCC District Agent's Name).

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

Producing Formation _____ Depth to Top 4132 Bottom 4144 T.D. 5098

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	392	None
				4 1/2	5098	Approx 2350

Describe in detail the manner in which the well was plugged, indicating where the mud fluid placed and the method or methods used in introducing it into the hole. If cement or other pl were used, state the character of same and depth placed, from _____ feet to _____ feet each s Push 4 1/2 wiper plug to 4100, sand on top of plug to 3950, dump 45sx cement with dump bailer, stretch and cut casing at 2350, lay down casing, Allied pump 300 hulls, 10 jel, 10 cement 10 jel, 100 hulls, 8 5/8 wiper plug, 100 sx cement, 60/40, 6% jel

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

Name of Plugging Contractor Clarke Corporation License _____

Address P.O. Box 187, Medicine Lodge, KS 67104

NAME OF PARTY RESPONSIBLE FOR PLUGGING FEES: Woolsey

STATE OF Kansas COUNTY OF Barber, ss.

Alan Vratil

(Employee of Operator) or (Operator)

above-described well, being first duly sworn on oath, says: That I have knowledge of the fac statements, and matters herein contained and the log of the above-described well as filed i the same are true and correct, so help me God.

(Signature) [Signature]

(Address) Medicine Lodge, KS 67104



SUBSCRIBED AND SWORN TO before me this 26 day of January, 1996

Glenda Morrison
 Notary Public

My Commission Expires: 10/14/98

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 KANSAS CORP COM
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