

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

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

API NUMBER 15-191-20,226

LEASE NAME McCall

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

WELL NUMBER 1

4620 Ft. from S Section Line

4620 Ft. from E Section Line

LEASE OPERATOR ARROWHEAD PETROLEUM OF KANSAS, INC.

SEC. 25 TWP. 32 RGE. 4W (E) or (W)

ADDRESS P.O. BOX 293, WELLINGTON, KS 67152

COUNTY SUMNER

PHONE# (316) 326-5735 OPERATORS LICENSE NO. 7233

Date Well Completed 9/12/70

Character of Well OIL

Plugging Commenced 9-11-91

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

Plugging Completed 9-12-91

The plugging proposal was approved on 9-6-91 (date)

by Steve Vangieson (KCC District Agent's Name).

Is ACO-1 filled? Yes If not, Is well log attached?

Producing Formation Mississippi Depth to Top 3951' Bottom 3980' T.D. 4337'

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	MUD	0	254'	8 5/8"	254'	0
MISSISSIPPI	MUD	0	4060	5 1/2"	4060'	1202'

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. Sand from 3915' to 3880'. Dump 5 sx cmt. Push halliburton plug to 3390'. Sand from 3390' to 3336'. Dump 5 sx cement. Shot 5 1/2" Casing off @ 1202'. Pull to 909'. Set 2 sx hulls and 35 sx cmt plug. Pull to 614'. Set 35 sx cmt plug. Pull to 323. Circulate cmt to surface. Pull casing. Fill hole with cmt.

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

Name of Plugging Contractor LYONS WELL SERVICE License No. 30375

Address 1103 S. ST. JOHN, LYONS, KS 67554

NAME OF PARTY RESPONSIBLE FOR PLUGGING FEES: ARROWHEAD PETROLEUM OF KANSAS, INC.

STATE OF KANSAS COUNTY OF SUMNER, ss.

Willis Lowe (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 that the same are true and correct, so help me God.

(Signature) Willis Lowe

(Address) Welligt, ks 67152

SUBSCRIBED AND SWORN TO before me this 20th day of November, 19 91

DOUG NORRIS
 NOTARY PUBLIC
 STATE OF KANSAS
 MY COMMISSION EXPIRES Expires: 3-2-92

[Signature]
 Notary Public

RECEIVED
 NOV 22 1991
 OPERATIONS
 SECTION