

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

002

API NUMBER 15-077-21142-00-01

LEASE NAME K.V. Williams

WELL NUMBER # 1

2970' Ft. from S Section Line

5040' Ft. from E Section Line

SEC. 31 TWP. 31S RGE. 6W (E) or (W)

COUNTY Harper

Date Well Completed 12-6-86

Plugging Commenced 12-20-95

Plugging Completed 12-22-95

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

LEASE OPERATOR Bryce F. Hayes Oil & Gas

ADDRESS P. O. Box 108 Attica, KS 67009-0108

PHONE # (316) 254-7204 OPERATORS LICENSE NO. 5429

Character of Well Good

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

The plugging proposal was approved on 12-6-95 (date)

by Doug Louis (KCC District Agent's Name).

Is ACO-1 filed? No If not, is well log attached? No

Producing formation Mississippi Depth to Top _____ Bottom _____ T.O. 4,628

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"	306'	None
				5 1/2"	4733'	3447'

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
Sand from 4270', dump 5 sks cement, Pull casing to 1165' spot 35 sks, pull to 749', spot
35 sks, pull to 376', circulate to surface 115 sks, pull remaining jts & fill to surface
with cement

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

Name of Plugging Contractor Clarke Corporation

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

RECEIVED
 STATE CORPORATION COMMISSION
 License No. 5105

NAME OF PARTY RESPONSIBLE FOR PLUGGING FEES: Bryce F. Hayes

STATE OF Kansas COUNTY OF Harper

MAR 27 1996

Bryce F. Hayes (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) Bryce F. Hayes
 (Address) _____

CAROL F. HAYES
 NOTARY PUBLIC
 STATE OF KANSAS
 My App't. Exp. Jan. 15, 1999

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

Carol F. Hayes
 Notary Public

My Commission Expires: 1-15-98

Copy