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

LEASE OPERATOR

Character of Well GAS

ADDRESS

AFG Energy Inc.

PHONE \$ (913) 625-6374 OPERATORS LICENSE NO. 3456

(Oll, Gas, D&A, SWO, Input, Water Supply Well)

P.O. Box 458; Hays, KS 67601

WELL PLUGGING RECORD ... K.A.R.-82-3-117 15.165-3517Z-0000

TYPE OR PRINT office within 30 days.

PI	NUMBER_	6-1-6	2
EA:	SE NAME	nc Gill	
EL	L NUMBER	#2	

NOTICE: Fill out completely and return to Cons. Div.

1320	Ft. from S Section Line	
3960	Ft. from E Section Line	
	TWP./75 RGE./7 (E) or (8)	
COUNTY	RUSH	

Date Well Completed 6-1-62

Plugging Commenced 2-20-97

Plugging	Completed	2-20-97
	•	-

The plugging proposal was approved on 2-20-97(date) RICHARD LACEY (XCC District Agent's Name).

Is AC0-1	filed? <u> </u>	ES If not,	is well log		
Producing	Formation	TOPEKA	Depth to	Ton 3066	Sottom 3078 Tin

_ Depth to Top<u>3066 ____</u> Bottom307*8* T:D.3633 PBTD 3195 Show depth and thickness of all water, oil and gas formations.

OIL, GAS OR WATER	RECORDS	<u> </u>			CASING RECO	RO
Formation	Content	From	То	Size	Put In	Pulled out
TOPEKA	GAS & Water	3066	3078	8%	217	None
			·	4/2	3212	None

Describe in detail the manner in which the well was plugged, indicating where the mud fluid wa placed and the method or methods used in introducing it into the hole. If cement or other plug HOOKED TO 42 CSG. MIXED 225 SYS 60/40 POZ 10% GEL WITH 500 # hulls. Shut in at 600#. Rack side full of Coment.

name of Plugging Contractor	Allied Cemer	ting Co. Inc.	License Nog	\$
Address	Russell, KS	67665	<u> </u>	NS.
NAME OF PARTY RESPONSIBLE FOR	PLUGGING FEES:	AFG Energy Inc.	γ	AS C
STATE OF Kansas	COUNTY OF	Ellis	, ss. h	ORPE PRORPE
Edgar L. Glassman		(Employee	et Operatori	C (6
above-described well, being fir	st duly sworn or	path, says: That	have knowledg	amat the test

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statements, and matters berein contained and the log of the above-described—relas filed tha

the same are true and correct, so net LINDA K. PFANNENSTIEL GOOTUP . **NOTABY PUBLIC** STATE OF KAMSAS
My Appt Exp2/5/2006Address) R.D.

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USE ONLY ONE SIDE OF EACH FORM

215/2000