

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

WELL NUMBER 1
5220 Ft. from S Section Line
330 Ft. from E Section Line
SEC. 22 TWP. 19N RGE 29W (E) or (W)
COUNTY Lane

LEASE OPERATOR Royal Petroleum
ADDRESS P.O. Box 1816 Liberal, Kansas 67905-1816

PHONE # (316) 624-0156 OPERATORS LICENSE NO. 30188

Character of Well oil

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

Date Well Completed 7-14-87

Plugging Commenced 5-4-93

Plugging Completed 5-4-93

The plugging proposal was approved on 5-4-93 (date)

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

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

Producing Formation Kansas City Depth to Top 4247 Bottom 4242 T.D. 4577
Marmaton 4453 4456

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		
				4 1/2	4576	0

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 plug were used, state the character of same and depth placed, from ___ feet to ___ feet each set
Pump 300# of hulls & 250 sks. of cement down 4 1/2" casing

Cut off & cap 8 5/8 3' below ground level

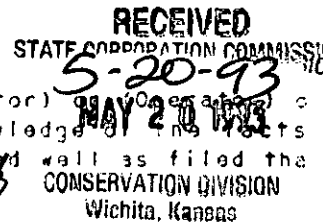
(If additional description is necessary, use BACK of this form.)

Name of Plugging Contractor Sargent's Casing Pulling Service License No. 6547

Address P.O. Box 506 Liberal, Kansas 67905-0506

NAME OF PARTY RESPONSIBLE FOR PLUGGING FEES: Royal Petroleum

STATE OF Kansas COUNTY OF Seward, ss.



Keith Hill (Employee of Operator) of the 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 the the same are true and correct, so help me God.

(Signature) [Signature]

(Address) P. O. Box 1816, Liberal, KS 67905-1816

SUBSCRIBED AND SWORN TO before me this 19th day of May, 19 93

[Signature]
Notary Public

My Commission Expires: _____

