| STATE CORPORATION CO                                                                              |                                                      | K.A.R                            | <b>-</b> -82-3 | -117                  | AP! NUM     | BER 15-101-                   | <u>21,532-00-01</u>     |  |
|---------------------------------------------------------------------------------------------------|------------------------------------------------------|----------------------------------|----------------|-----------------------|-------------|-------------------------------|-------------------------|--|
| 200 ©dorado Derby 8<br>Wichita, Kamsas 672                                                        |                                                      |                                  |                |                       |             | LEASE NAME Bryant "A" OWWO    |                         |  |
| •                                                                                                 |                                                      | TYPE OR PRINT                    |                |                       | WELL NU     | WELL NUMBER#1                 |                         |  |
| •                                                                                                 | CE: Fill out <u>completely</u>                       |                                  |                | 2270                  | Ft. from (§ | Section Line                  |                         |  |
|                                                                                                   | 0                                                    | ffice wi                         | thin 3         | O days.               | 3020        | Ft. from (E                   | Section Line            |  |
| LEASE OPERATOR The Dane G. Hansen Trust                                                           |                                                      |                                  |                |                       | SEC. 3      | TWP. 195 RGE                  | .30W (E)or(W)           |  |
| ADDRESS P.O. Box 187, Logan, KS 67646                                                             |                                                      |                                  |                |                       | COUNTY      | Lane                          |                         |  |
| PHONE#(913) 689-4816 OPERATORS LICENSE NO. 5285                                                   |                                                      |                                  |                |                       | Oate We     | il Completed                  | 4-8-92                  |  |
| Character of Well D&A                                                                             |                                                      |                                  |                |                       | Pluggin     | g Commenced                   | 4-8-92                  |  |
| (OII, Gas, D&A, SWD, Input, Water Supply Well)                                                    |                                                      |                                  |                |                       | Pluggin     | g Completed                   | 4-8-92                  |  |
| The plugging proposa                                                                              | l was approved                                       | on                               | 4-8-92         | 2                     |             |                               | (etsb)                  |  |
| by Casey Morri                                                                                    | s                                                    |                                  |                |                       | (KC         | C District A                  | gent's Name).           |  |
| Is ACO-1 filed?                                                                                   |                                                      |                                  |                |                       |             |                               |                         |  |
| Producing formation                                                                               | none                                                 | Depti                            | h to T         | op                    | Bott        | omT.                          | o. 1554'                |  |
| Show depth and thick                                                                              |                                                      |                                  |                |                       |             |                               |                         |  |
| OIL, GAS OR WATER R                                                                               | ECORDS                                               |                                  |                | c                     | ASING RECO  | RD                            |                         |  |
|                                                                                                   | tnetno                                               | From                             | То             | Size                  | Put In      | Pulled out                    |                         |  |
| -                                                                                                 |                                                      | _                                | _}-            | <u></u>               |             | -0-                           |                         |  |
|                                                                                                   |                                                      |                                  |                |                       |             |                               |                         |  |
|                                                                                                   | <del></del>                                          | - <del> </del>                   | -              |                       |             |                               |                         |  |
| Describe in detail to placed and the methoder were used, state to 70 sx @ 1300',50 Total 150 sx 6 | od or methods us<br>he character o<br>0 sx @ 380', [ | sed in in<br>f same a<br>10 sx @ | ntrodu         | cing it i             | nto the ho  | le. If cemen                  | t or other plu          |  |
|                                                                                                   | 3710 000111117                                       | o qui                            |                |                       |             |                               |                         |  |
| ·                                                                                                 | - 🛫                                                  |                                  |                |                       |             |                               |                         |  |
| Name of Plugging Con                                                                              | tractor                                              | Chief I                          | Orilli         | ing, Inc              | •           | License No                    | <sub>ഗു</sub> 5886      |  |
| Address 120 S.                                                                                    | Market, #300                                         | , Wichit                         | ta, Ka         | nsas 67               | 202         |                               | TRES A                  |  |
| NAME OF PARTY RESPON                                                                              | SIBLE FOR PLUGG                                      | ING FEES:                        | Tì             | ne Dane               | G. Hansen   | Trust                         | Ma Back                 |  |
| STATE OF Kansas                                                                                   | C                                                    | OUNTY OF                         | Lo             | ogan                  |             | _,55. 4,5                     | The arthur and a second |  |
| Dane G. B                                                                                         |                                                      | <del></del>                      |                |                       |             | f Operator) 🧖                 |                         |  |
| above-described well<br>statements, and ma                                                        | tters herein co                                      | benieta                          | and the        | eth, says<br>e log of | : That I ha | ave knowledge<br>described we | soon the factoring      |  |
| the same are true an                                                                              | d correct, so h                                      | elp me Go                        | od.            | Signature             | <i>U</i> .  | 1 Bala                        | ·                       |  |
|                                                                                                   |                                                      |                                  | ( )            | Address)              | P. O. Box   | ales<br>: 187, Logan,         | Kansas 67646            |  |
| SUB                                                                                               | SCRIBED AND SWO                                      | RN TO bes                        | fore m         | e this                | 30 day      | ofApril                       | ,1 <b>9</b> 92          |  |
| BETTY JANE BITT<br>State of Kansas<br>My Appt. Exp. July 17,                                      | TEL.                                                 |                                  | -              | Set                   | hu          | Sitt                          | el_                     |  |
| My                                                                                                | Commission Expl                                      | res: Ju                          | ly 17.         | 1992                  | / Not       | Betty Jar                     | ne Bittel               |  |
| USE ONLY ONE S                                                                                    | aidie (o)fieach f                                    |                                  |                |                       |             |                               |                         |  |

WELL PLUGBING RECORD

STATE OF KANSAS

Form CP-4 Revised 05-88

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

## WELL PLUGGING APPLICATION FORM (PLEASE TYPE FORM and File ONE Copy)

| API # wells drilled since | (Identifier number of 1967; if no API# was issue            | of this well).<br>ed, indicate sp | This must pud or compl | be listed for etion date. |  |  |  |
|---------------------------|-------------------------------------------------------------|-----------------------------------|------------------------|---------------------------|--|--|--|
| WELL OPERATOR             | (owner/company name                                         |                                   | KCC LICENS             | E #                       |  |  |  |
| ADDRESS                   | (owner/company name                                         | CITY                              | (0                     | operator's)               |  |  |  |
| STATE                     | ZIP CODE                                                    | CONTACT PHO                       | ONE # ( ) _            |                           |  |  |  |
| LEASE                     | WELL#                                                       | SEC T                             | · R                    | (East/West)               |  |  |  |
|                           | SPOT LOCATION/QQQQ COU                                      | NTY                               |                        |                           |  |  |  |
| FEET (in ex               | act footage) FROM S/N (circ                                 | le one) LINE OF                   | SECTION (N             | OT Lease Line)            |  |  |  |
| FEET (in ex               | act footage) FROM E/W (circ                                 | le one) LINE OF                   | SECTION (N             | OT Lease Line)            |  |  |  |
| Check One: OIL WELL       | GAS WELL D&A                                                | SWD/ENHR WELL                     | DOCKET#                | <del> </del>              |  |  |  |
| CONDUCTOR CASING SI       | ZE SET AT                                                   | CEMENTED WI                       | тн                     | SACKS                     |  |  |  |
| SURFACE CASING SIZE       | SET AT                                                      | CEMENTED WI                       | TH                     | SACKS                     |  |  |  |
| PRODUCTION CASING S       | PRODUCTION CASING SIZE SET AT CEMENTED WITH SACKS           |                                   |                        |                           |  |  |  |
| LIST (ALL) PERFORAT       | IONS and BRIDGEPLUG SETS:                                   |                                   |                        |                           |  |  |  |
| ELEVATION                 | .B.) T.D PBTD                                               | ANHYDRIT                          | E DEPTH                | Formation)                |  |  |  |
|                           | GOOD POOR C.                                                |                                   |                        |                           |  |  |  |
|                           | PLUGGING                                                    |                                   |                        |                           |  |  |  |
|                           |                                                             |                                   |                        |                           |  |  |  |
|                           | f additional space is neede                                 | d attach separ                    | ate page)              |                           |  |  |  |
| IS WELL LOG ATTACHE       | ED TO THIS APPLICATION AS RE                                | QUIRED?                           | IS ACO-1 FI            | LED?                      |  |  |  |
| If not explain why?       |                                                             |                                   |                        |                           |  |  |  |
|                           | ELL WILL BE DONE IN ACCORDANCE ONS OF THE STATE CORPORATION |                                   | 55-101 <u>et.</u>      | seq. AND THE              |  |  |  |
| LIST NAME OF COMPAN       | NY REPRESENTATIVE AUTHORIZED                                | TO BE IN CHARG                    | GE OF PLUGGI           | NG OPERATIONS:            |  |  |  |
|                           |                                                             | PHONE# (                          | )                      |                           |  |  |  |
| ADDRESS                   | City/                                                       | State                             |                        |                           |  |  |  |
| PLUGGING CONTRACTOR       | R(company na                                                |                                   | KCC LICE               | ISE #                     |  |  |  |
| ADDRESS                   | R(company na                                                | me)<br>PHONE # (                  | (co                    | ntractor's)               |  |  |  |
| •                         | NOUR OF PLUGGING (If Known?)                                |                                   |                        |                           |  |  |  |
| PAYMENT OF THE PLU        | GGING FEE (K.A.R. 82-3-118)                                 | WILL BE GUARAN                    | TEED BY OPE            | RATOR OR AGENT            |  |  |  |
| DATE:                     | _ AUTHORIZED OPERATOR/AGENT:                                | ·                                 |                        | ·                         |  |  |  |
| <del></del>               |                                                             |                                   | signature)             |                           |  |  |  |