WELL PLUGGING RECORD STATE OF KANSAS K.A.R.-82-3-117 API NUMBER 15-101-20.278-000/ STATE CORPORATION COMMISSION 200 Colorado Derby Building LEASE NAME Hall SWD \_\_\_\_ Wichita, Kansas 67202 WELL NUMBER 1 TYPE OR PRINT NOTICE: Fill out completely 3730 Ft. from S Section Line and return to Cons. Div. office within 30 days. 330 Ft. from E Section Line LEASE OPERATOR A. L. Abercrombie, Inc. SEC. 29 TWP. 16 RGE. 27 (R) or (W) COUNTY \_\_\_Lane ADDRESS Rt. #1, Box 56, Great Bend, Ks. 67530 Date Well Completed 4-12-85PHONE#(316) 793-8186 OPERATORS LICENSE NO. 5393 10-1-90 Character of Well \_ SWD Plugging Commenced Plugging Completed 10-1-90(Oll, Gas, D&A, SWD, Input, Water Supply Well) The plugging proposal was approved on September 18, 1990 (date) by <u>David P. Williams</u> <u>Dodge City District #1 - (KCC District Agent's Name).</u> Is ACO-1 filed? Yes If not, is well log attached? Producing Formation Cedar Hill Sand Depth to Top 1633' Bottom 1900' T.D. 4600' Show depth and thickness of all water, oil and gas formations. CASING RECORD OIL, GAS OR WATER RECORDS Put In Pulled out To Size Content Formation 8 5/8 40 293 1715 None Cedar Hill Sand | Water 4 1/2 2140 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. Mix 300# Hulls - 120 sacks ATL Cement fill to surface with 100# standing Hook up to annulus PSI immediately State Plugger Dan Goodrow Plugging complete 3:00 pm 10-1-90 (if additional description is necessary, use BACK of this form.) Name of Plugging Contractor A. L. Abercrombie, Inc. License No. 5393 Address Rt. #1, Box 56, Great Bend, Ks. 67530 NAME OF PARTY RESPONSIBLE FOR PLUGGING FEES: A. L. Abercrombie, Inc. RECEIVED STATE CORPORATION COMMISSION COUNTY OF Barton STATE OF Kansas\_\_\_\_ (Employee of Operator) or (Operator) of E. L. Abercrombie 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 weill as filed that the same are true and correct, so help me God. (Signature) Ellereconi-MOTARY PUBLIC - State of Kansas

1 SUSAN M. EVERS

My Commission Expires: 7-29-92

My Appt. Exp. 2-29-92

Form CP-4 Revised 05-88

(Address) Rt. #1, Box 56, Great Bend, Ks.

Sunan M. Covers

SUBSCRIBED AND SWORN TO before me this 8 th day of October ,19 90