

STATE OF KANSAS  
STATE CORPORATION COMMISSION  
30 S. Market, Room 2078  
Wichita, KS 67202

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

API NUMBER 15-171-20.041-0000

LEASE NAME Margaret Cauthon

WELL NUMBER 1

4,000 Ft. from S Section Line

4,000 Ft. from E Section Line

SEC. 22 TWP. 18 RGE. 31 (E) or (W)

COUNTY Scott

Date Well Completed 12/14/72

Plugging Commenced 01/21/98

Plugging Completed 01/21/98

TYPE OR PRINT  
NOTICE: Fill out completely  
and return to Cons. Div.  
office within 30 days. 7  
6-29-98

LEASE OPERATOR Unico, Inc.

ADDRESS P.O. Box 35, Farmington, NM 87499

PHONE/(505) 326-2668 OPERATORS LICENSE NO. 3857

Character of Well Gas

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

The plugging proposal was approved on 01/21/98 (date)

by Kevin Strube (KCC District Agent's Name).

Is ACO-1 filed? Yes If not, is well log attached? Filed with application

Producing Formation Krider Depth to Top 2,939<sup>KB</sup> Bottom 2,934<sup>GL</sup> T.D. 2,788

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
Freshwater-250	Water					
Permian 1400	Water	Top	2787	5 1/2		850 Feet Recovered
Anhydrite 2200	Saltwater	Top	369	8 5/8		
Krider 2744	Gas/Saltwater					

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.

1st plug L-K Wireline set CIBP at 2400' with 4 sx cement on top.

2nd plug perforated at 1400' two holes pumped 80 sx cement displaced to 900'

3rd plug shot casing off at 850' and pulled up to 420' Pumped 50 sx cement

4th plug pulled up to 40' and topped off with 13 sx cement

Name of Plugging Contractor Cheyenne Well Service License No. 6454

Address P.O. Box 384, Ness City, KS 67560-0384

NAME OF PARTY RESPONSIBLE FOR PLUGGING FEES: Unico, Inc.

STATE OF New Mexico COUNTY OF San Juan, ss.

Rick L. Hurt, Treasurer (Employee of Operator) or (Operator) of 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) Rick L. Hurt

(Address) P.O. Box 35, Farmington, NM 87499

SUBSCRIBED AND SWORN TO before me this 24th day of June, 19 98

My Commission Expires: September 6, 2000

Notary Public