

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

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

API NUMBER 15-165-21630-0000

LEASE NAME Price

TYPE OR PRINT

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

WELL NUMBER 1-22

660 Ft. from S Section Line

2310 Ft. from E Section Line

SEC. 22 TWP. 19 RGE. 20 (E) or (W)

COUNTY Rush

Date Well Completed 05/15/93

Plugging Commenced 05/15/93

Plugging Completed 05/15/93

LEASE OPERATOR Ensign Operating Co.

ADDRESS 621 17th St., #1800, Denver, CO 80293

PHONE# (303) 293-9999 OPERATORS LICENSE NO. 04782

Character of Well D&A

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

The plugging proposal was approved on 05/14/93 (date)

by Steve Durant (KCC District Agent's Name).

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

Producing Formation N/A Depth to Top _____ Bottom T.D.

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 |
|-----------|---------|------|-----|-------|--------|------------|
| | | | 666 | 8 5/8 | 666 | 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 plugs were used, state the character of same and depth placed, from feet to feet each set.

50 sx 60/40 Poz mix, 6% gel @ 1470' 10 sx 60/40 Poz mix, 6% gel in mousehole
50 sx 60/40 Poz mix, 6% gel @ 690' Cut off & capped surf
10 sx 60/40 Poz mix, 6% gel F/40-3' Csg 3' below GI
15 sx 60/40 Poz mix, 6% gel in rathole

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

Name of Plugging Contractor Duke Drilling Co., Inc. License No. 5929

Address P O Box 823, Great Bend, KS 67530

NAME OF PARTY RESPONSIBLE FOR PLUGGING FEES: Ensign Operating Co.
City & _____

STATE OF Colorado COUNTY OF Denver, ss.

Conni Smith

(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 that the same are true and correct, so help me God.

(Signature) Conni Smith

RECEIVED

(Address) 621 17th St., #1800, Denver, CO 80293

SUBSCRIBED AND SWORN TO before me this 14th day of June 1993

Patricia S. Campbell
Notary Public

My Commission Expires: 9/30/94