

API NUMBER 15-203-20,103-0000

LEASE NAME COAKES

WELL NUMBER #1

 Ft. from S Section Line

 Ft. from E Section Line

SEC. 29 TWP. 20S RGE. 35 (E) or (W)

COUNTY WICHITA

Date Well Completed

Plugging Commenced 4-19-94

Plugging Completed 4-19-94

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

LEASE OPERATOR GREAT PLAINS RESOURCES, INC.

ADDRESS P.O. BOX 369, LITTLETON, CO 80160

PHONE (303) 979-4029 OPERATORS LICENSE NO.

Character of Well D&A

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

The plugging proposal was approved on 4-19-94 (date)

by (unknown) (KCC District Agent's Name).

Is ACC-1 filed? No If not, is well log attached?

Producing Formation Depth to Top Bottom T.D. 5100

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"	265'	None

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. Fill w/heavy mud; set 1st plug @ 2350'-2150' w/50 sx; 2nd plug @ 1300'-1100' w/50 sx; 3rd plug @ 650'-450' w/50 sx; 4th plug @ 300'-100' w/50 sx; 5th plug @ 40'-surface w/10 sx; rathole 15 sx; Total 225 sx 60-40 posmix 6% gel 1/2# Floseal per sk.

Name of Plugging Contractor Abercrombie RTD, Inc. License No. 30684

Address 150 N. Main, Suite 801, Wichita, KS 67202

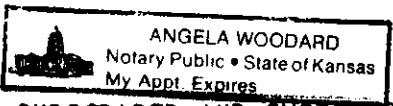
NAME OF PARTY RESPONSIBLE FOR PLUGGING FEES: Great Plains Resources, Inc.

STATE OF Kansas COUNTY OF Sedgwick, ss. 5-16

Mark R. Galyon (Employee of Operator) or (Operator) of above-described well, being first duly sworn on oath, says: That I have knowledge of the facts stated herein, and matters herein contained and the log of the above-described well as filed the same are true and correct, so help me God.

(Signature) Mark R. Galyon 67202

(Address) 150 N. Main, Suite 801, Wichita, KS



SUBSCRIBED AND SWORN TO before me this 10th day of May, 19 94

Angela Woodard
Notary Public

My Commission Expires: 3-21-97

USE ONLY ONE SIDE OF EACH FORM.

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

FORM CP-1
Rev. 03/92

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

API # _____ (Identifier number of this well). This must be listed for wells drilled since 1967; if no API# was issued, indicate spud or completion date.

WELL OPERATOR _____ KCC LICENSE # _____
(owner/company name) (operator's)

ADDRESS _____ CITY _____

STATE _____ ZIP CODE _____ CONTACT PHONE # () _____

LEASE _____ WELL# _____ SEC. _____ T. _____ R. _____ (East/West)

_____ SPOT LOCATION/QQQQ COUNTY _____

_____ FEET (in exact footage) FROM S/N (circle one) LINE OF SECTION (NOT Lease Line)

_____ FEET (in exact footage) FROM E/W (circle one) LINE OF SECTION (NOT Lease Line)

Check One: OIL WELL _____ GAS WELL _____ D&A _____ SWD/ENHR WELL _____ DOCKET# _____

CONDUCTOR CASING SIZE _____ SET AT _____ CEMENTED WITH _____ SACKS

SURFACE CASING SIZE _____ SET AT _____ CEMENTED WITH _____ SACKS

PRODUCTION CASING SIZE _____ SET AT _____ CEMENTED WITH _____ SACKS

LIST (ALL) PERFORATIONS and BRIDGEPLUG SETS: _____

ELEVATION _____ T.D. _____ PSTD _____ ANHYDRITE DEPTH _____
(G.L./K.E.) (Stone Corral Formation)

CONDITION OF WELL: GOOD _____ POOR _____ CASING LEAK _____ JUNK IN HOLE _____

PROPOSED METHOD OF PLUGGING _____

(If additional space is needed attach separate page)

IS WELL LOG ATTACHED TO THIS APPLICATION AS REQUIRED? _____ IS ACO-1 FILED? _____

If not explain why? _____

PLUGGING OF THIS WELL WILL BE DONE IN ACCORDANCE WITH K.S.A. 55-101 et. sec. AND THE RULES AND REGULATIONS OF THE STATE CORPORATION COMMISSION.

LIST NAME OF COMPANY REPRESENTATIVE AUTHORIZED TO BE IN CHARGE OF PLUGGING OPERATIONS:

_____ PHONE# () _____

ADDRESS _____ City/State _____

PLUGGING CONTRACTOR _____ KCC LICENSE # _____

ADDRESS _____ (company name) PHONE # () _____

PROPOSED DATE AND HOUR OF PLUGGING (If known?) _____

PAYMENT OF THE PLUGGING FEE (K.A.R. 82-3-118) WILL BE GUARANTEED BY OPERATOR OR AGENT

DATE: _____ AUTHORIZED OPERATOR/AGENT: _____

(signature)

RECEIVED
STATE CORPORATION COMMISSION

MAY 16 1994

CONSERVATION DIVISION
Wichita, Kansas

EFFECTIVE DATE: 4-1-94

DISTRICT # 1
SRA? Yes

State of Kansas
NOTICE OF INTENTION TO DRILL

203-20,103-002

FORM MUST BE TYPED
FORM MUST BE SIGNED
ALL BLANKS MUST BE FILLED

Must be approved by the K.C.C. five (5) days prior to commencing well

Expected Spud Date April 5 1994
month day year

OPERATOR: License # 05449
Name: Great Plains Resources, Inc.
Address: P.O. Box 369
City/State/Zip: Littleton, CO 80160
Contact Person: J. Robert Tuck
Phone: (303) 979-4029

CONTRACTOR: License #: 30684
Name: Abercrombie Drilling

Well Drilled For: Well Class: Type Equipment:
X Oil ... Enh Rec ... Infield X Mud Rotary
... Sas ... Storage ... Pool Ext. ... Air Rotary
... OWM ... Disposal X Wildcat ... Cable
... Seismic; ... # of Holes ... Other
... Other
If OWM: old well information as follows:
Operator:
Well Name:
Comp. Date: Old Total Depth

Directional, Deviated or Horizontal wellbore? ... yes X no
If yes, true vertical depth:
Bottom Hole Location:

Exp. 9/28/94

AFFIDAVIT 200' Alt. II Req.

RECEIVED

The undersigned hereby affirms that the drilling, completion and eventual plugging of this well will comply with K.S.A. 55-101, et. seq.
It is agreed that the following minimum requirements will be met:

Pusher: Angie Fischer
SPUD DATE: 4-1-94 INIT. AW
LENGTH SURFACE PLANNED 260'
RESERVE PIT STATUS- REMOVE FLUID LINED
after salt sect. bbls. when done bbls.
RATHOLED AHEAD? Y N SIZE HOLE
SURFACE PIPE 1 1/2 @ 265 CONDUCTOR
ANHYDRITE T- 2279 B- 2293 ELEVATION
TD 5100 FORMATION
RAN PIPE @ DV TOOL ALT II DONE
SX SX Y N
Arbuckle Plug @ Ft. W/ SX
Hug./Council @ Ft. W/ SX
Anhydrite Base @ 2350 Ft. W/ 50 SX
1/2 Base Anhy. @ 1300 Ft. W/ 50 SX
1/2, 1/2 Plug @ 650 Ft. W/ 50 SX
Bottom Surface @ 200 Ft. W/ 50 SX
40' Plug @ 40 Ft. W/ 10 SX
RAT HOLE CIRC/W 15 SX MOUSE HOLE W/ 15 SX
WATER WELL SX (Irr. Well Pond
TECHNICIAN DATE 4-15-94 Hauling
TYPE OF CEMENT 60/40 67. 1/4 #
STARTING TIME 5:30 (AM/PM) DATE 4-19-94
COMPLETION TIME 9:00 (AM/PM) DATE 4-20-94
CEMENT COMPANY Milled