

STATE OF KANSAS
STATE CORPORATION COMMISSION
600 Coleridge Derby Building
Wichita, Kansas 67202

WELL PLUGGING RECORD
K.A.R.-62-3-117

API NUMBER 15-203-20,114-0000

LEASE NAME UHLAND

WELL NUMBER 2

2310 FT. from S Section Line

1980 FT. from E Section Line

SEC. 25 TWP. 20 RGE. 35 (E) or (W)

COUNTY Wichita

Date Well Completed 8-9-94

Plugging Commenced 08-11-94

Plugging Completed 08-11-94

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

EASE OPERATOR A. L. ABERCROMBIE, INC.

ADDRESS 150 N. Main, Ste. 801, Wichita, Ks. 67202

PHONE/(316) 262-1841 OPERATORS LICENSE NO. 5393

Character of Well D & A

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

The plugging proposal was approved on 08-11-94 (date)

BY Case Morris (KCC District Agent's Name)

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

Producing Formation _____ 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	Feet In	Pulled out
				8 5/8"	283.66'	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, from ___ feet to ___ feet each set.
Fill w/heavy mud; set 1st plug from 2800' to 2400' w/100 sx; 2nd plug from 2300' to 2100' w/50 sx; 3rd plug from 1250' to 1010' w/60 sx; 4th plug from 650' to 450' w/50 sx; 5th plug from 320' to 120' w/50 sx; 6th plug from 40' to surface w/10 sx; rathole 15 sx. Total 335 sx; 60-40 Posmix, 6% gel, 1/4# Floseal per sk.

Name of Plugging Contractor ABERCROMBIE RTD, INC. License No. 30684

Address 180 N. Main, Ste. 801, Wichita, Ks. 67202

NAME OF PARTY RESPONSIBLE FOR PLUGGING FEES: A. L. Abercrombie, Inc.

STATE OF Kansas COUNTY OF Sedgwick

Jack K. Wharton

(Employee or Operator)

The above-described well, being first duly sworn on oath, says: That he has knowledge of the facts stated herein, and matters herein contained and the log of the above-described well as filed therewith, and the same are true and correct, so help me God.

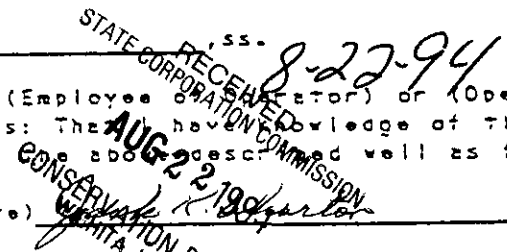
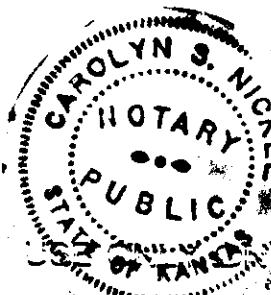
(Signature) _____

(Address) 105 N. Main, Ste. 801, Wichita, Ks. 67202

SUBSCRIBED AND SWORN TO before me this 18th day of August, 1994

Carolyn S. Nickell
NOTARY PUBLIC

My Commission Expires: _____
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.B.) (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 _____

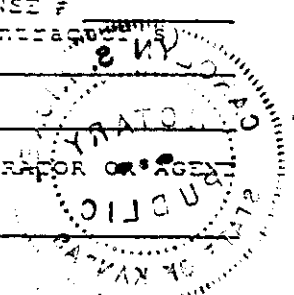
PLUGGING CONTRACTOR _____ KCC LICENSE # _____
(company name) (contractor's)

ADDRESS _____ PHONE # () _____

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

PAYMENT OF THE PLUGGING FEE (K.A.R. 82-3-116) WILL BE GUARANTEED BY OPERATOR OR AGENT

DATE: _____ AUTHORIZED OPERATOR/AGENT: _____
(signature)



EFFECTIVE DATE: 6-15-94

DISTRICT # 1
Yes No

State of Kansas
NOTICE OF INTENTION TO DRILL

203-20,114-0000

FORM MUST BE TYPE
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 6 15 94
month day year

Section N/2 NW SE Sec 25 Twp 20 S. Rg 35 East

OPERATOR: License # 5393
Name: A. L. ABERCROMBIE, INC.
Address: 150 N. MAIN, STE 801
City/State/Zip: WICHITA, KS 67202
Contact Person: JERRY A. LANGREHR
Phone: 316-262-1841

2310' feet from South/North line of Section
1980' feet from East/West line of Section
IS SECTION REGULAR IRREGULAR?

CONTRACTOR: License #: 30684
Name: ABERCROMBIE RTD., INC.

(NOTE: Locate well on the Section Plat on Reverse Side)
County: WICHITA
Lease Name: UHLAND Well #: 2
Field Name:

Well Drilled For: Well Class: Type Equipment:
X Oil ... Enh Rec ... Infield X Mud Rotary
... Gas ... Storage X Pool Ext. ... Air Rotary
... OGW ... Disposal ... Wildcat ... Cable
... Seismic: ... # of Holes ... Other

Is this a Pre-rated/Spec'd Field? ... yes X no
Target Formation(s): MARMATON
Nearest lease or unit boundary: 330'
Ground Surface Elevation: 3140' est. feet MSL
Water well within one-quarter mile: ... yes X no
Public water supply well within one mile: ... yes X no
Depth to bottom of fresh water: 100'
Depth to bottom of usable water: 500' 1180'
Surface Pipe by Alternate: ... 1 X ... 2
Length of Surface Pipe Planned to be set: (260') 200'
Length of Conductor pipe required: 0'
Projected Total Depth: 5100'
Formation at Total Depth: MISSISSIPPI

If OGW: old well information as follows:
Operator: N/A
Well Name:
Comp. Date: Old Total Depth

Water Source for Drilling Operations:
... well ... farm pond X other:
DWR Permit #: WILL FILE
Will Cores Be Taken?: ... yes X no
If yes, proposed zone: N/A

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

Exp. 12/10/94

AFFIDAVIT

200' Alt. II Req.

RECEIVED
STATE CORPORATION COMMISSION
JUN 10 1994

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

1. Notify the

Pusher Tony Martin
SPUD DATE 8-1-94 INIT. SD
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 2 1/2" @ 283' CONDUCTOR
ANHYDRITE T- 2250 B- 2264' ELEVATION
TD 5050 FORMATION
RAN PIPE @ DV TOOL ALT II DONE
SX SX Y N
Arbuckle Plug @ Ft. W/ SX
Hug./Council @ 2800 Ft. W/ 100 SX
Anhydrite Base @ 2300 Ft. W/ 50 SX
1/2 Base Anyh. @ 1250 Ft. W/ 60 SX
1/2, 1/2 Plug @ 650 Ft. W/ 50 SX
Bottom Surface @ 320 Ft. W/ 50 SX
40' Plug @ 40 Ft. W/ 10 SX
RAT HOLE CIRC/W 15 SX MOUSE HOLE W/ SX
WATER WELL SX (Irr. Well Pond
Hauling
TECHNICIAN CM DATE 8-5-94
TYPE OF CEMENT 60/40 670 # 0.5
STARTING TIME (AM/PM) DATE
COMPLETION TIME (AM/PM) DATE 8-10
CEMENT COMPANY Allied

RECEIVED
STATE CORPORATION COMMISSION
AUG 1 1994
CONSERVATION DIVISION
WICHITA, KANSAS