STATE OF KANSAS WELL PLUGGING RECORD STATE CORPORATION COMMISSION K.A.R.-82-3-117 API NUMBER 15 200 Colorado Derby Building Wichita, Kansas 67202 LEASE NAME CCX TYPE OR PRINT WELL NUMBER C#1 NOTICE: Fill out completely and return to Cons. Div. 1320 Ft. from N Section Line office within 30 days. 660 Ft. from W Section Line LEASE OPERATOR N. J. R. E. Operating Co. SEC. 9 TWP. 31S RGE. 9 KKXXXX(W) ADDRESS 2400 Bank IV Center, SW 6th Street, Tulsa, OK COUNTY Harper PHONE#(918) 585-1031 OPERATORS LICENSE NO. 31289 Date Well Completed Character of Well Good Plugging Commenced 7-18-94 (OII, Gas) D&A, SWD, Input, Water Supply Well) Plugging Completed 7-20-94 The plugging proposal was approved on June 23, 1994 _____(date) by Steve VanGesson _____ (KCC District Agent's Name). Is ACO-1 filed? 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 Put in To Size Pulled out 8.5/8 257 None 4^{1} 2000 4492 Describe in detail the manner in which the well was plugged, indicating where the mud fluid placed and the method or methods used in introducing it into the hole. If cement or other pl were used, state the character of same and depth placed, from feet to feet each s Set CIBP at 2500', dumped 2sx cement on top of plug, cut casing at 3000', pulled casing, tubing to 1500', spotted 35sx cement, pulled to 950', spotted 35sx cement, pulled to 310' circulated to surface. (If additional description is necessary, use BACK of this form.) License Nos, 5105 Name of Plugging Contractor Clarke Corporation Address P.O. Box 187, Medicine Lodge, KS 67104 NAME OF PARTY RESPONSIBLE FOR PLUGGING FEES: N J R E Operating (Employee of Operator) STATE OF Kansas COUNTY OF Barber Jeff Sletto above-described well, being first duly sworn on oath, says: That I have knowledge of the fac statements, and matters herein contained and the log of the above-described well as filed t the same are true and correct, so help me God. (Signature) GLENDA MORRISON NOTARY PUBLIC STATE OF KANSAS (Address) Medicine Lodge, KS 67104 My Appl. Exp. Aug. 17, 1994 SUBSCRIBED AND SWORN TO before me this 26 day of July **,19** 94 Mourson Notary Public My Commission Expires: _August 17, 1994