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

Character of Well Oil

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

API NUMBER 15,007-21,723-0000

					_
LEASE	NAME	Fritz	''A''	#1	

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

WELL NUMBER #14950 Ft. from S Section Line

3630 Ft. from E Section Line

SEC. 28 TWP. 32 RGE. 14 XXXOr(W) LEASE OPERATOR TXO Production Corp. ADDRESS 155 N. Market, Suite 155, Wichita, KS. 67202 COUNTY Barber

PHONE#(316) 269-7600 OPERATORS LICENSE NO. 5171 Date Well Completed 3-13-84

Plugging Commenced 10-14-86

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

Plugging Completed 10-14-86

Did you notify the KCC/KDHE Joint District Office prior to plugging this well? YES

Which KCC/KDHE Joint Office did you notify? Unknown

Is ACO-1 filed? YES If not, is well log attached? Producing Formation _____ Depth to Top_____ Bottom____ T.D. 4900'

Show depth and thickness of all water, oil and gas formations.

OIL, GAS OR WATER RECORDS CASING RECORD

Formation	Content	From	То	Size	Put in	Pulled out
	Surface		-	8-5/8''	432	
	Production			4-1/2"	121 jts.	
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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. Pumped 3 sxs hulls, 20 sxs gel, 100 sxs Econolite. MTP=300 psig. ISIP=150 psig.

Job complete @ 2:45 p.m. on 10-14-86.

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

Name of Plugging Contractor <u>Clar</u>ke Oilfield Services _____License No. 5105

Address 107 S. Fowler, Medicine Lodge, KS. 67104

__ county of Sedgwick STATE OF Kansas

Cory West (Employee of Operator) or (Operator) of above-described well, being on the facts, statements, and matters hemeing meantagined and the log of the above-described well as filed that the same are true and correct, so help me God.

(Signature) Cony West

MY APPT. EXPIRES 7

(Address)

SUBSCRIBED AND SWORN TO before me this 155 N. Market, Ste 1000, Wichita, KS day of Notober 1986

My Commission Expires: July 10, 1988

Connie F. Koehler NOTARY PUBLIC State of Kansas/VK

Form CP-4 Revised 08-84