

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

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

API NUMBER 15155-21,224 0000

LEASE NAME Newell

WELL NUMBER #1

665' FNL-1975' FEL
 _____ Ft. from S Section Line

_____ Ft. from E Section Line
 C-NW-NW-NE

SEC. 19 TWP. 24S RGE. 10W (E) or (W)

COUNTY Reno

Date Well Completed _____

Plugging Commenced 2-8-93

Plugging Completed 2-18-93

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

LEASE OPERATOR Raymond Oil Company, Inc.

ADDRESS P.O. Box 48788 Wichita, Kansas 67201-9740

PHONE # 316-838-7811 OPERATORS LICENSE NO. _____

Character of Well Oil

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

The plugging proposal was approved on _____ (date)

by Jack Luthi (KCC District Agent's Name).

Is ACO-1 filed? _____ If not, Is well log attached? _____

Producing Formation _____ Depth to Top _____ Bottom T.D. 3895'

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
				10-3/4"	252'	none
				5-1/2"	3882'	2605'

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. Plugged off bottom with sand to 3830' and 5 sacks cement. Shot pipe @3000', 2909', 2800', 2720', 2690', 2605', pulled up to 1420', set 35 sacks cement, set 35 sacks @900', pulled up to 300' and circulated cement to surface with 140 sacks pulled rest of pipe and topped off with 10 sacks cement. 60/40 pos. 4% gel.
 (If additional description is necessary, use BACK of this form.) Plugging Complete.

Name of Plugging Contractor KELSO CASING PULLING, INC. License No. 6050

Address P.O. Box 347 Chase, Kansas 67524

NAME OF PARTY RESPONSIBLE FOR PLUGGING FEES: Raymond Oil Co., Inc. Box 48788 Wichita, Kansas 67201

STATE OF Kansas COUNTY OF Rice, ss.

R. Darrell Kelso (Employee of Operator) _____ (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, and that the same are true and correct, so help me God.

(Signature) R. Darrell Kelso

(Address) P.O. Box 347 Chase, KS. 67524

SUBSCRIBED AND SWORN TO before me this 23rd. day of February, 1993

Jane Terberg
 Notary Public

My Commission Expires: _____

