

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

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

API NUMBER 15-007-21658-0000

LEASE NAME Alexander

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

WELL NUMBER 1

660 Ft. from S Section Line

1980 Ft. from E Section Line

SEC. 1 TWP. 32 SRGE. 15 ~~XXXX~~ (W)

COUNTY Barber

Date Well Completed _____

Plugging Commenced 2-16-95

Plugging Completed 2-21-95

LEASE OPERATOR Daystar Petroleum Inc.

ADDRESS 1321 W. 93rd N., Valley Center, KS 67147

PHONE# (316) 755-3523 OPERATORS LICENSE NO. 30931

Character of Well Good

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

The plugging proposal was approved on 2-16-95 (date)

by Steve Middleton (KCC District Agent's Name)

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

Producing Formation _____ Depth to Top 4045 Bottom 4047 T.D. 4224

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	337	None
				5 1/2	4224	2400

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 plugging materials were used, state the character of same and depth placed, from _____ feet to _____ feet each s
Sand bottom to 3980, dump 5sx cement with dump bailer, stretch and cut pipe at approx 2400, lay down casing, Allied pump 300 hulls, 10 gel, 50 cement, 10 gel, 100 hulls 8 5/8 wiper plug, 100sx cement 60/40, 6% gel.

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

Name of Plugging Contractor Clarke Corporation

Address P.O. Box 187, Medicine Lodge, KS 67104

NAME OF PARTY RESPONSIBLE FOR PLUGGING FEES: Daystar Petroleum Inc.

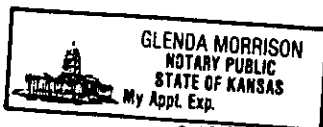
STATE OF Kansas COUNTY OF Barber

Alan Vratil

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

(Signature) [Signature]

(Address) Medicine Lodge, KS 67104



SUBSCRIBED AND SWORN TO before me this 2 day of March, 19 95

[Signature]
Notary Public

My Commission Expires: 10/14/98