20875 <u>w</u> STATE OF KANSAS WELL PLUGGING RECORD API NUMBER 15077-20815.000 STATE CORPORATION COMMISSION K.A.R.-82-3-117 200 Colorado Derby Building Wichita, Kansas 67202 LEASE NAME Ferrell WELL NUMBER 3 TYPE OR PRINT NOTICE: Fill out completely 3300 Ft. from S Section Line and return to Cons. Div. office within 30 days. 1840 Ft. from E Section Line LEASE OPERATOR Attica Gas Venture SEC. 24 TWP. 32 RGE. 9 KKXor(W) ADDRESS 123 N. Main COUNTY Harper PHONE# (316) 254-7222 OPERATORS LICENSE NO. 5039 Date Well Completed Plugging Commenced 12-13-96 Character of Well Gas (Oll, Gas, D&A, SWD, Input, Water Supply Well) Plugging Completed 12-17-96 The plugging proposal was approved on 12-13-96(date) by Steve Vangeeson (KCC District Agent's Name). Is ACO-1 filed? yes If not, is well log attached? yes Producing Formation <u>Douglas</u> Depth to Top <u>3451</u> Bottom 3461 T.D. 3732 Show depth and thickness of all water, oil and gas formations. OIL, GAS OR WATER RECORDS CASING RECORD Pulled out Formation Content From To Size Put In 259 8.5/8 None 3732 2800 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 Lav down rods and tubing, sand hole back to 3400, dump 4sx portland cement with dump bailer, stretch and cut pipe at 2800, lay down 45 casing, run 238 tubing to 1371 and spot 35sx, pull tubing to 861 spot 35sx, pull tubing to 319 and circulate cement to surface 60/40 4% jel, lay down 2 3/8 4% jol lay down 2 3/8
(If additional description is necessary, use BACK of this form.) Name of Flugging Contractor <u>Clarke Corporation</u> <u>License No. 5105</u> 5 Address P.O. Box 187, Medicine Lodge, KS 67104 NAME OF PARTY RESPONSIBLE FOR PLUGGING FEES: Attica Gas Venture STATE OF Kansas COUNTY OF Barber (Employee of Operator) or (Operator) Alan Vratil 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 (Address) Medicine Lodge, KS 67104 NOTARY PUBLIC STATE OF KANSAS My Appt. Exp. 0-10-21
SUBSCRIBED AND SWORN TO before me this 18 day of December ,1996 Alon Da Mouson Notary Public

My Commission Expires: 10/14/98