

15-007-30276-0000

STATE OF KANSAS
STATE CORPORATION COMMISSION

Form CP-4

Give All Information Completely
Make Required Affidavit
Mail or Deliver Report to:
Conservation Division
State Corporation Commission
212 No. Market
Wichita, Kansas 67202

WELL PLUGGING RECORD

Barber County. Sec. 29 Twp. 32 Rge. 11W (A) (W)
Location as "NE/CNWSW" or footage from lines C NW SW

Lease Owner Clarke Corporation
Lease Name Zimmerman Well No. 2

Office Address 107 W. Fowler Medicine Lodge, Kansas

Character of Well (completed as Oil, Gas or Dry Hole) Gas

Date well completed July 23 19 66

Application for plugging filed June 19 19 73

Application for plugging approved June 25 19 73

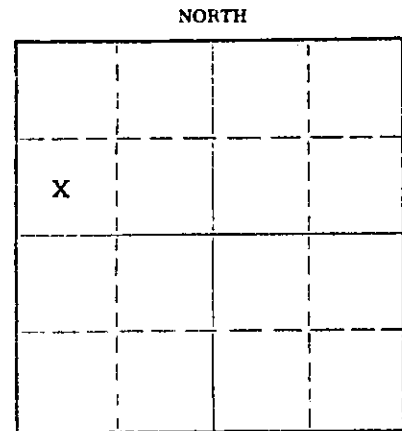
Plugging commenced August 14 19 73

Plugging completed August 22 10:00 19 73

Reason for abandonment of well or producing formation Would not produce

If a producing well is abandoned, date of last production Never 19

Was permission obtained from the Conservation Division or its agents before plugging was commenced? Yes



Locate well correctly on above
Section Plat

Name of Conservation Agent who supervised plugging of this well Russell Biberstien

Producing formation Douglas Sand Depth to top 3,712 Bottom 3,725 Total Depth of Well 3,725 Feet

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
				4 1/2	3,712	2,450
				8 5/8	217	None

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 for each plug set.

Sand From 3,725 to 3,700
Dumped 4 sacks cement from 3,700 to 3,680

Ripped pipe at 3,300 and 3,200 3,100 3,000 2,900 2,800 2,600 2,450

Build wood bridge at 200 foot

Rock from 200 to 190 foot

Then dumped 3 yards of Redi-mix concrete cement to bottom of cellar

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

Name of Plugging Contractor Clarke Corporation
Address 107 W. Fowler Medicine Lodge, Kansas 67104

STATE OF Kansas COUNTY OF Barber, ss.

Elmo Morgenstern (employee of owner) or (owner or operator) of the 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 as filed and that the same are true and correct. So help me God.

(Signature) Elmo Morgenstern
Medicine Lodge, Kansas
(Address)

SUBSCRIBED AND SWORN to before me this 22nd day of August, 19 73

My commission expires April 4, 1974

Jessie Hamilton
Notary Public.