

API NUMBER 15015-22109-0000

LEASE NAME Ulsh

WELL NUMBER 2

990 Ft. from S Section Line

1650 Ft. from W Section Line

SEC. 6 TWP. 23 RGE. 4 (E) or (W)

COUNTY Butler

Date Well Completed _____

Plugging Commenced 4/16/01

Plugging Completed 4/18/01

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

LEASE OPERATOR Hizey Service & Supply, Inc.

ADDRESS Box 296 Augusta Ks. 67010

PHONE# (316) 775-5496 OPERATORS LICENSE NO. 32444

Character of Well oil

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

The plugging proposal was approved on 4/16/01 (date)

by Butch Hoberacht (KCC District Agent's Name).

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

Producing Formation Mississippi Depth to Top 2470 Bottom 2476 T.D. 2534

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

OIL, GAS OR WATER RECORDS

RECEIVED
 STATE CORPORATION COMMISSION
 CASING RECORD

Formation	Content	From	To	Size	Put In	Pulled Out
<u>Mississippi</u>	<u>oil/water</u>	<u>0</u>	<u>2534</u>	<u>4 1/2"</u>	<u>2534</u>	<u>1650</u>

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 pipe were used, state the character of same and depth placed, from feet to _____ feet each section.
Moved in - plugged bottom up to 2420 then put 4 sacks on top of bottom plug. Shot pipe @ 1650 built bridge from 300-250. Baled well down and cemented to surface. Ticket # 300044 slurry

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

Name of Plugging Contractor BPC Well Plugging License No. 32475

Address Box 282 Burden Ks. 67019

NAME OF PARTY RESPONSIBLE FOR PLUGGING FEES: Hizey Service & Supply, Inc.

STATE OF Kansas COUNTY OF Butler, ss.

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

(Signature) Michael W. Kiser

(Address) Box 296 Augusta, Ks. 67010

SUBSCRIBED AND SWORN TO before me this 26th day of April, 19 2001

DENISE E. LEWIS
 Notary Public - State of Kansas
 My Appt. Expires 4-1-02

Denise E. Lewis
 Notary Public

My Commission Expires: 4-1-02

ORW