

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

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

API NUMBER 15-007-20389-0000

LEASE NAME Lukins

WELL NUMBER 1

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

NE-SW-NE Ft. from S Section Line

Ft. from E Section Line

SEC. 28 TWP. 32 RGE. 11 (E) or (W)

LEASE OPERATOR KBW Oil Company

COUNTY Barber

ADDRESS P.O. Box H Belfang Oklahoma 73000

PHONE # (408) 789-0118 OPERATORS LICENSE NO. _____

Date Well Completed 5-20-76

Character of Well Oil

Plugging Commenced 1-23-89

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

Plugging Completed _____

Did you notify the KCC District Office prior to completion of this well? Yes

Which KCC Office did you notify? Dodge City, Ks.

Is ACO-1 filed? Yes If not, is well log attached? No, not available.

Producing Formation _____ Depth to Top _____ Bottom _____ T.D. 4839

Show depth and thickness of all water, oil and gas formations. plug back 2960

OIL, GAS OR WATER RECORDS

CASING RECORD

Formation	Content	From	To	Size	Put In	Pulled out
				8 5/8	325	0
				4 1/2	4503	2200

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.
Plug at 2960 sand up to 2740 - 45 sacks cement wits dump bailer-- BJ Pump -
3-5sacks Hulls - 10 sacks gel - 50 sacks cement. 10 sacks gel 15 sacks Hull -
1 plug. 100 sacks cement.

p. Sfer and Morgenstern
(If additional description is necessary, use BACK of this form.)

Name of Plugging Contractor Clarke Corporation License No. 5105

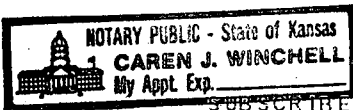
Address Box 187 Medicine Lodge, ks. 67104

STATE OF Ks. COUNTY OF Barber, ss.

(Employee of Operator) or (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 as filed that the same are true and correct, so help me God.

(Signature) Elmer P. Morgenstern

(Address) Box 187 Medicine Lodge, Ks. 67104



SUBSCRIBED AND SWORN TO before me this 30 day of January, 19 89

Caren J. Winchell
Notary Public

My Commission Expires: June 21, 1991