

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

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

077-20936-000
API NUMBER 15-072-10936 TMB-VCC

LEASE NAME Smith

WELL NUMBER 1-26

1980 Ft. from S Section Line

1320 Ft. from E Section Line

SEC. 26 TWP. 32 RGE. 9 (E) or (W)

COUNTY Harper

Date Well Completed _____

Plugging Commenced 12-27-95

Plugging Completed 1-5-96

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

LEASE OPERATOR Attica Gas Ventures

ADDRESS 123 N. Main, Attica, KS 67009

PHONE# (316) 254-7222 OPERATORS LICENSE NO. 5037

Character of Well Good

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

The plugging proposal was approved on 12-29-95 (date)

by Steve Vangeeson and Jerry Clark (KCC District Agent's Name).

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

Producing Formation Miss Depth to Top 3721 Bottom 3726 T.O. _____

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	294	None
				5 1/2	3956	Approx 2900

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
Lay down rods and tubing, sand well back to 3618, dump 5sx cement with dump bailer, stretch and cut pipe at 2900. lay down casing, run tubing to 1253, spot 35sx cement, Allied pull tubing to 868 and spot 35sx, pull tubing to 354 and circulate cement to surface.

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

Name of Plugging Contractor Clarke Corporation License No. 5105

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

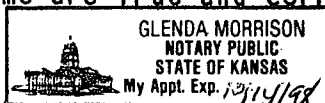
NAME OF PARTY RESPONSIBLE FOR PLUGGING FEES: Attica Gas Venture

STATE OF Kansas COUNTY OF Barber, ss.

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 8 day of January, 1996

Glenda Morrison
Notary Public

My Commission Expires: 10/14/98