WELL PLUGGING RECORD STATE OF KANSAS API NUMBER 15-007-22,312-00-00 K.A.R.-82-3-117 STATE CORPORATION COMMISSION 200 Colorado Derby Building LEASE NAME_____Donovan Wichita, Kansas 67202 TYPE OR PRINT WELL NUMBER 'G' 1 NOTICE: Fill out completely and return to Cons. Div. 4620__ Ft. from S Section Line office within 30 days. 820 Ft. from E Section Line LEASE OPERATOR American Energies Corporation SEC. 9__TWP. 34 RGE. 13 (MESKARX(W)) ADDRESS 155 N. Market, Suite 710 Wichita, KS 67202 COUNTY _____Barber___ PHONE#(316) 263-5785 OPERATORS LICENSE NO. 5399 Date Well Completed 6/10/90Character of Well _____D&A___ Plugging Commenced $\underline{-6/10/90}$ (Oli, Gas, D&A, SWD, Input, Water Supply Well) Plugging Completed 6/10/90The plugging proposal was approved on _____ _____(date) (KCC District Agent's Name). Is ACO-1 filed? Yes If not, is well log attached? Producing Formation _____ Depth to Top_____ Bottom_____T.D. Show depth and thickness of all water, oil and gas formations. CASING RECORD OIL, GAS OR WATER RECORDS Formation Put in Content From To Size Pulled out 0___ 400' 8-5/8" 400' Surface CONSERVATION DIVISION Wichita Kar Describe in detail the manner in which the well was plugged, indicating where the mud^{3d}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. Plugged well with 125 sx of 60/40 Poz, 6% gel as follows:

847' with 50 sx; 412' with 50 sx; 40' with 10 sx; rathole with 15 sx
added 50 sx common 3%cc to top plug. (if additional description is necessary, use BACK of this form.) Name of Plugging Contractor ALLEN DRILLING COMPANY License No. 5418 Address P.O. Box 1389 Great Bend, KS 67530 NAME OF PARTY RESPONSIBLE FOR PLUGGING FEES: American Energies Corporation STATE OF Kareas COUNTY OF Salaviely, ss.

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 filled that the same are true and correct, so help me God.

MELINDA S. WOOTEN

(Signature)

(Address)

(Address)

(Address)

(Address)

(Address)

SUBSCRIBED AND SWORN TO before me this 9th day of 1990

Notary Public

My Commission Expires: 3-12.92