

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

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

API NUMBER 15-007-21689-00-04

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

LEASE NAME M-R

WELL NUMBER #1

660 Ft. from Section Line

3300 Ft. from Section Line

SEC. 12 TWP. 32S RGE. 11 ~~XXXX~~ (W)

COUNTY Barber

Date Well Completed _____

Plugging Commenced 8-28-95

Plugging Completed 8-30-95

LEASE OPERATOR Hummon Corp.

ADDRESS 200 W. Douglas, Suite 1020, Wichita, KS 67202

PHONE# (316) 263-8521 OPERATORS LICENSE NO. 5050

Character of Well Good

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

The plugging proposal was approved on 8-28-95 (date)

by Steve Middleton (KCC District Agent's Name).

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

Producing Formation _____ Depth to Top 2556 Bottom 3632

RECEIVED
STATE CORPORATION COMMISSION
9-8-95
SEP 08 1995

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	282	None
				5 1/2	3737	Approx 2250

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 plug were used, state the character of same and depth placed, from ___ feet to ___ feet each set. Lay down rods and tubing, set CIBP at 2500', dump 25sx with dump bailer, stretch and cut pipe at 2250', lay down casing, Allied pump in 300 hulls, 10 jel, 50sx cement, 10 jel 100 hulls, 8 5/8 wiper plug, 100sx cement 60/40 6%

(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

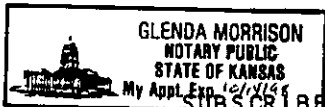
NAME OF PARTY RESPONSIBLE FOR PLUGGING FEES: Hummon Corp.

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 fact statements, and matters herein contained and the log of the above-described well as filed the same are true and correct, so help me God.

(Signature) [Signature]

(Address) Medicine Lodge, KS 67104



SUBSCRIBED AND SWORN TO before me this 7 day of September, 19 95

Glenda Morrison
Notary Public

My Commission Expires: 10/14/98