

LEASE NAME Hartley

WELL NUMBER B-2

2510 Ft. from S Section Line

1270 Ft. from E Section Line

SEC. 35 TWP. 30 RGE. 13 ~~13~~ (W)

COUNTY Barber

Date Well Completed \_\_\_\_\_

Plugging Commenced 4-17-97

Plugging Completed 4-22-97

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

LEASE OPERATOR Woolsey Petroleum

ADDRESS 107 N. Market, Suite 600, Wichita, KS 67202

PHONE#(316) 886-5606 OPERATORS LICENSE NO. 5506

Character of Well good

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

The plugging proposal was approved on 4-17-97 (date)

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

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

Producing Formation N/A Depth to Top 3756 Bottom 3760 T.D. 3850

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	338	None
				4 1/2	3949	2500

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, sand well back to 3680, dump 4sx portland cement with dump bailor, stretch and cut pipe at 2500, lay down casing, Allied pump 300 hulls, 10 jel, 50sx cement, 10 jel, 100 hulls, 8 5/8 wiper plug and 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 4.29.97

NAME OF PARTY RESPONSIBLE FOR PLUGGING FEES: Woolsey Petroleum

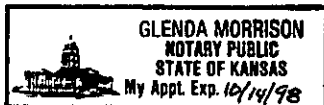
STATE OF Kansas COUNTY OF Barber, ss.

Alan Vratil (Employee of Operator) or (Operator) o

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

(Signature) [Signature]

(Address) Medicine Lodge, KS 67104



SUBSCRIBED AND SWORN TO before me this 25 day of April, 19 97

[Signature]  
 Notary Public

My Commission Expires: 10/14/98