ATE OF KANSAS WELL PLUGGING RECORD API NUMBER 15-00722202 -00-00 K.A.R.-82-3-117 ATE: CORPORATION COMMISSION 0: S. Market, Room 2078 LEASE NAME Adams chite, KS 67202 WELL NUMBER #3 TYPE OR PRINT NOTICE: Fill out completely and return to Cons. Div. _____ Ft. from S Section Line office within 30 days. ____ Ft. from E...Section Line EASE OPERATOR _ A.L. Abercrombie, Inc. SEC. 33 TWP. 31 RGE. 12W (E) or (W) JORESS Rt. 1 Box 56 Great Bend, Ks. 67530 COUNTY Barber HONE# (316) 793-8186 OPERATORS LICENSE NO. 5393 Date Well. Completed ___ haracter of Well Gas Plugging Commenced 9-8-98Plugging Completed 9-10-98DII, Gas, D&A, SWD, Input, Water Supply Well) ne plugging proposal was approved on ______ (date) Scott Alberg (XCC District Agent's Name). s ACO-1 filed?______If not, is well log attached?_____ roducing Formation Depth to Top Bottom T.D. 3750' how depth and thickness of all water, oil and gas formations. GAS OR WATER RECORDS CASING RECORD Formation Content From Size To Pulled out Put In 4291 None · 8-5/8 3749 24001 escribe in detail the manner in which the well was plugged, indicating where the mud fluid a laced and the method or methods used in introducing it into the hole. If cement or other all ere used, state the character of same and depth placed, from feet to feet each see Plugged off bottom with sand to 3669' and 4 sacks cement. Shot pipe @2600' and 2400'. Pulled up to 600', pumped 10 sks. gel and 50 sks. cement, pulled to 400', pumped 40 sks. cement, pulled to 40' and circulated 25 sks. cement to surface. 60/40 pos, 6% gel. Plugging Complete. i idiyar ame of Plugging Contractor Mike's Testing & Salvage, Inc. License No. 31529 1000年 (1987年) P.O. Box 467 Chase, Kansas 67524 ddrass $\overline{z} \leq$ IAME OF PARTY RESPONSIBLE FOR PLUGGING FEES: A.L. Abercrombie, Inc. TATE OF Kansas ರ್ಷ COUNTY OF Rice Ξ (D) Mike <u>Kelso</u> (Employee of Operator)—or-(Operator) bove-described well, being first duly sworn on oath, says: That I have knowledge of the fact tatements, and matters berein contained and the log of the above-described well as filed to hersame are true and correct, so help me God. (Signature) The Sulfame (Address) P. O. Box 467 Chase, KS 67524 SUBSCRIBED AND SWORN TO before me this 17th day of September lesshers Notary Public My Commission Expires: IRENE HERZBERG

State of Kansas My Appt. Exp. Aug. 24, 2001 Rovised 05-