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

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

API NUMBER 15 077-21,089-00-00

LEASE NAME Shellhammer

WELL NUMBER 1

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

_____ Ft. from S Section Line

_____ Ft. from E Section Line

LEASE OPERATOR Williams Brothers Engineering Mutual Energy Corporation

SEC. 21 TWP. 33s RGE. 8W (E) or (W)

ADDRESS P.O. Box 989, Great Bend, Kansas

COUNTY Harper

PHONE# (316) 792-4356 OPERATORS LICENSE NO. _____

Date Well Completed 11-7-85

Character of Well dry hole

Plugging Commenced 11-7-85

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

Plugging Completed 11-7-85

Did you notify the KCC/KDHE Joint District Office prior to plugging this well? yes

Which KCC/KDHE Joint Office did you notify? Kingman, KS

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.

OIL, GAS OR WATER RECORDS | CASING RECORD

Formation	Content	From	To	Size	Put in	Pulled out
Surface		0	219	8 5/8	219	0

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 plugs were used, state the character of same and depth placed, from __ feet to __ feet each set.

Mud to 900' cemented with 35 sx; mud to 270' cemented with 35 sx; mud to 60' with bridge plug cemented with 25sx; 10 sx in rathole.

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

Name of Plugging Contractor Sun Cementing License No. _____

Address Great Bend, Kansas

STATE OF Kansas COUNTY OF Sedgwick ,ss.

Timothy F. Brandt (Employee of Operator) or (Operator) of 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 that the same are true and correct, so help me God.

(Signature) [signature]

(Address) 105 S. Broadway, Suite 920
Wichita, Kansas 67202

SUBSCRIBED AND SWORN TO before me this 15th day of November, 19 85

[signature]
Notary Public

My Commission Expires: [illegible]

NOTARY PUBLIC
STATE OF KANSAS
MY APPT. EXPIRES

RECEIVED
STATE CORPORATION COMMISSION
11-15-85
NOV 15 1985
CONSERVATION DIVISION
Wichita, Kansas

Form CP
Revised 08-