

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

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

API NUMBER 15-007-20952-0000

LEASE NAME Norma

WELL NUMBER 1

 Ft. from S Section Line

660 Ft. from E Section Line

SEC. 35 TWP. 34 RGE. 12 ~~W~~ (W)

COUNTY Barber

Date Well Completed

Plugging Commenced 9-3-97

Plugging Completed 9-12-97

LEASE OPERATOR Molz Oil Company

ADDRESS RR #2, Box 54, Kiowa, KS 67070

PHONE#(316) 296-4558 OPERATORS LICENSE NO. 6006

Character of Well Good

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

The plugging proposal was approved on 9-3-97 (date)

by Mike Maier (KCC District Agent's Name).

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

Producing Formation Miss Depth to Top 4804 Bottom 4821 T.D. 4859

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	381	325
				4 1/2	4859	3700

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 section. Lay down rods and tubing, sand well back to 4700, dump 4sx portland cement with dump bailer, stretch and cut pipe at 3700, lay down casing, Allied pump 300 hulls, 10 jel, 50 cement, 10 jel 100 hulls, 8 5/8 wiper, 100sx, 60/40, 6% jel

(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: Molz Oil Company

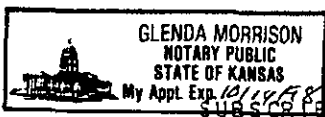
STATE OF Kansas COUNTY OF Barber, ss.

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

(Signature) [Signature]

(Address) Medicine Lodge, KS 67104



SUBSCRIBED AND SWORN TO before me this 17 day of September, 1997

[Signature]
Notary Public

My Commission Expires: 10/14/98