

LEASE NAME Graves

WELL NUMBER B-1

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

660 Ft. from (S) Section Line

2970 Ft. from (E) Section Line

LEASE OPERATOR McGinness Oil

SEC. 28 TWP. 34s RGE. 12 ~~XXXX~~ (W)

ADDRESS 150 N. Main Suite 1026 Wichita, KS 67202

COUNTY Barber

PHONE# (316) 267-6065 OPERATORS LICENSE NO. 5255

Date Well Completed _____

Character of Well good

Plugging Commenced 7-29-96

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

Plugging Completed 8-15-96

The plugging proposal was approved on 7-29-96 (date)

by Kevin Strubbe (KCC District Agent's Name).

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

Producing Formation Miss Depth to Top 4809 Bottom 4852 T.D. 4896

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	326	None
				4 1/2	4895	3500

Describe in detail the manner in which the well was plugged, indicating where the mud fluid placed and the method or methods used in introducing it into the hole. If cement or other pl were used, state the character of same and depth placed, from ___ feet to ___ feet each s
Lay down rods and tubing, sand well back to 4690, dump 4sx portland with dump bailer, stretch and cut pipe at 3500, lay down 4 1/2 casing, Allied pump 300 hulls, 10 jel, 50sx cement, 10 jel 100 hulls, 8 5/8 wiper, 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

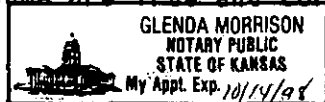
NAME OF PARTY RESPONSIBLE FOR PLUGGING FEES: McGinness Oil

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 fac 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

KANSAS CORPOR

SUBSCRIBED AND SWORN TO before me this 16 day of August, 1996

AUG 21
8-20-96
CONSERVATION
WICHITA, KS

My Commission Expires: 10/14/98

Glenda Morrison
Notary Public