

STATE OF KANSAS
STATE CORPORATION COMMISSION
1001 S. Market, Room 2078
Wichita, KS 67202

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

API NUMBER 033-20190-00-01

LEASE NAME Halton

WELL NUMBER #1 OWWO

1320 Ft. from S Section Line

2590 Ft. from E Section Line

SEC. 3 TWP. 31 RGE. 17 (E) or (W)

COUNTY Comanche

Date Well Completed _____

Plugging Commenced 12-26-02

Plugging Completed 12-31-02

RECEIVED
JAN 09 2003
KCC WICHITA

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

LEASE OPERATOR L.D. Drilling, Inc.

ADDRESS 7 SW 26th Avenue Great Bend, Ks. 67530

PHONE# (620) 793-4879 OPERATORS LICENSE NO. 6039

Character of Well Oil

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

The plugging proposal was approved on _____ (date)

Steve Middleton (KCC District Agent's Name)

Is ACC-1 filled? _____ If not, is well log attached? _____

Producing Formation _____ Depth to Top _____ Bottom _____ T.O. 5377'

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"	901'	None
				4-1/2"	5241'	4010'

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 plugs are used, state the character of same and depth placed, from feet to feet each side.
Plugged off bottom with sand to 4800' and 4 sacks cement. Shot pipe @4010', pulled up to 950', pumped 10 sacks gel and 50 sacks cement, pulled up to 400', pumped 40 sacks cement, pulled up to 40' and topped off with 20 sacks cement, 60/40 pos. 6% gel.
Plugging Complete.

Name of Plugging Contractor Mike's Testing & Salvage, Inc. License No. 31529

Address P.O. Box 467, Chase, Kansas 67524

NAME OF PARTY RESPONSIBLE FOR PLUGGING FEES: L.D. Drilling, Inc.

STATE OF Kansas COUNTY OF Rice, ss.

Mike Kelso (Employee of Operator) or (Operator)

above-described well, being first duly sworn on oath, says: That I have knowledge of the facts and statements, and matters herein contained and the log of the above-described well as filed therewith, and the same are true and correct, so help me God.

(Signature) [Signature]

(Address) P. O. Box 467 Chase, KS 67524

SUBSCRIBED AND SWORN TO before me this 8th day of January, 2003

[Signature]
Notary Public

My Commission Expires:

NOTARY PUBLIC - State of Kansas
IRENE HERZBERG
My Appt. Exp. 2-24-05