WELL PLUGGING RECORD STATE OF KANSAS STATE CORPORATION COMMISSION K.A.R.-82-3-117 API NUMBER15-007-21,092.00.00 200 Colorado Derby Building LEASE NAME Z-Bar Wichita, Kansas 67202 WELL NUMBER E#1 TYPE OR PRINT NOTICE: Fill out completely _330 Ft. from **b** Section Line and return to Cons. Div. office within 30 days. 2210 Ft. from Salsection Line LEASE OPERATOR Woolsey Petroleum SEC. 9 TWP.35 RGE.15 XXXXXX (W) COUNTY Barber ADDRESS 107 N. Market, Wichita, KS 67202 PHONE # (316) 886-5606 OPERATORS LICENSE NO. 5506 Date Well Completed Character of Well Good Plugging Commenced 7-17-96 (Oil, Gas, D&A, SWD, Input, Water Supply Well) Plugging Completed 7-22-96 The plugging proposal was approved on 7-17-96(date) (KCC District Agent's Name). by Bill Johnson Is ACO-1 filed? ves If not, is well log attached? ves CIBP @ Producing Formation Krider Depth to Top 2412 Bottom 2418 T.D. 2665 Show depth and thickness of all water, oil and gas formations. CASING RECORD OIL, GAS OR WATER RECORDS From Size Put in Pulled out Formation Content To 1005 8 5/8 None 5145 Describe in detail the manner in which the well was plugged, indicating where the mud fluid w placed and the method or methods used in introducing it into the hole. If cement or other plu were used, state the character of same and depth placed, from__feet to___feet each se Push 4 wiper to 2400, dump 100 gal. sand. sand TD @ 2339, dump 4sx portland with dump bailer stretch and cut pipe @ 2200, lay down casing. Allied pump 300 hulls, 10 jel, 50 cement, 10 jel, 100 hulls, 8 5/8 wiper and 100 sx. 60/40, 6% jel. (if additional description is necessary, use BACK of this form.) PECENTED

Name of Plugging Contractor <u>Clarke Corporation</u> License No. <u>5105</u> Address P.O. Box 187, Medicine Lodge, KS 67104 STATE OF Kansas COUNTY OF Barber ,ss. (Employee of Operator) or (Operator) Alan Vratil above-described well, being first duly sworn on oath, says: That I have knowledge of his fact statements, and matters herein contained and the log of the above-described well Aas filed the the same are true and correct, so help me God. (Signature)_ druvall GLENDA MORRISON STATE OF KANSAS (Address) <u>Medicine Lodge, KS 67104</u> My Appt. Exp. 10-14.98 SUBSCRIBED AND SWORN TO before me this 22 day of July ,1996 Alenda Marinan Notary Public

My Commission Expires: 10/14/98