

STATE OF KANSAS
STATE CORPORATION COMMISSION
130 South Market Room 2078
Wichita, Kansas 67202

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

API NUMBER 15-007-22-123-00-01

LEASE NAME Kumberg

WELL NUMBER #4 SWD Docket # D-27,341

2640 Ft. from N/S Section Line

700 Ft. from E/W Section Line

SEC. 21 TWP. 30s RGE. 12 XXXX (W)

COUNTY Barber

Date Well Completed _____

Plugging Commenced 6-25-99

Plugging Completed 7-19-99

LEASE OPERATOR McGinness Oil

ADDRESS 150 N. Main, Suite 1026, Wichita, KS 67202

PHONE# 316 267-6065 OPERATORS LICENSE NO. 31881

Character of Well Good

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

The plugging proposal was approved on 6-25-99 (date)

by Steve Piefer (KCC District Agent's Name).

Is ACO-1 filed? yes If not, is well log attached? no

Producing Formation Miss Depth to Top 4562 Bottom 4568 T.D. 4629 PBTD

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	332	None
				4 1/2	4666	2000

Describe in detail the manner in which the well was plugged, indicating where the mud fluid was placed and the 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.

Mike's Testing & Salvage sanded well back to 4500, dump 4sx cement, stretch and cut pipe at 2000, lay down 4 1/2 casing. Acid Service pumped 300 hulls, 10jel, 50sx cement, 10 jel, 100 hulls blew hole in surface pipe - 7/17/99, Clarke Corp. drill out to 700, spot 50sx, pull tubing to 345 and spot 50sx, pull tubing to 40 and circulate to surface 60/40 6%
(If additional description is necessary, use BACK of this form.)

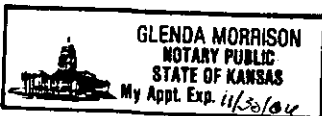
Name of Plugging Contractor Clarke Corporation License No. 5105

Address P.O. Box 187, 107 W. Fowler, 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) 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) Medicine Lodge, KS 67104

SUBSCRIBED AND SWORN TO before me this 20 day of July, 1999

[Signature]
Notary Public

My Commission Expires: 11/30/04