

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

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

API NUMBER 15-099-23135-0000

RECEIVED
BASE NAME LZAPhANSKY

ORIGINAL

TYPE OR PRINT APR 18 2003
NOTICE: Fill out ~~completely~~
and return to ~~WICHITA~~
office within 30 days.

WELL NUMBER 10
511 Ft. from (S) Section Line
1150 Ft. from (E) Section Line

LEASE OPERATOR LOREN SMITH
ADDRESS 5501 NW 124 Thre
PHONE (620) 429-6733 OPERATORS LICENSE NO. 8462

SEC. 8 TWP. 32 RGE. 21 (E) or (W)
COUNTY LABETTE
Date Well Completed 11-24-2000
Plugging Commenced 11-24-2000
Plugging Completed 11-24-2000

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

The plugging proposal was approved on 11-16-2000 (date)
by STEVE Korf (KCC District Agent's Name).

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

Producing Formation BARTLESVILLE Depth to Top Ground Bottom 441 T.D. 441

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
<u>OIL</u>	<u>WATER</u>	<u>Ground</u>		<u>7 inch</u>	<u>21</u>	<u>NONE</u>

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 plug were used, state the character of same and depth placed, from feet to feet each set

RUN IN 140 FT ONE INCH PIPE, PUMP TWO BOTTOM TWO TOP

Name of Plugging Contractor LOREN SMITH License No. 8462

Address 5501 NW 124 Thre OSWEGO KS 67354

NAME OF PARTY RESPONSIBLE FOR PLUGGING FEES: LOREN SMITH

STATE OF KS COUNTY OF LABETTE, ss.

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

(Signature) _____

(Address) _____

SUBSCRIBED AND SWORN TO before me this _____ day of _____, 19 _____

Notary Public

My Commission Expires: _____