STATE OF KANSAS
STATE CORPORATION COMMISSION
200 Colorado Derby Building
Wichita, Kansas 67202

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

API NUMBER 15-033-20046-0000

LEASE NAME Unruh

WELL NUMBER C-1

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

50's Ft. from S Section Line

S-C SW NW Ft. from E Section Line

LEASE OPERATOR Graham Michaelis Corporation

SEC. 2 TWP. 31S RGE. 18 (E) or (W)

ADDRESS Po Box 247 Wichita, KS 67201

COUNTY Comanche

PHONE # (316) 264-8394 OPERATORS LICENSE NO. 5134

Date Well Completed 2-26-69

Character of Well Oil

Plugging Commenced 2-5-91

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

Plugging Completed 3-13-91

Did you notify the KCC District Office prior to plugging this well? yes

Which KCC Office did you notify? Dodge City

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

Producing Formation _____ Depth to Top _____ Bottom _____ T.D. 5181

Show depth and thickness of all water, oil and gas formations.

RECEIVED
STATE CORPORATION COMMISSION
3-18-91
MAR 18 1991
CONSERVATION DIVISION
Wichita, Kansas

OIL, GAS OR WATER RECORDS | CASING RECORD

Formation	Content	From	To	Size	Put In	Pulled out
				8 5/8	971	none
				4½	5180	2800

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

sand from 5150 to 4975 ripped at 3200 -3100 -300-2900 - 2800
BJ pumped -3-H-10-J-50-C-10-J-1-H plug 150 sx 60-40 POZ 6% Jell

Dave Patterson

(If additional description is necessary, use BACK of this form.)

Name of Plugging Contractor Clarke Corporation License No. 5105

Address PO Box 187 Medicine Lodge, KS 67104

STATE OF Kansas COUNTY OF Barber ,ss.

Elmo R. Morgenstern (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) Elmo R. Morgenstern

(Address) Medicine Lodge, KS 67104

SUBSCRIBED AND SWORN TO before me this 15th day of March, 19 91

NOTARY PUBLIC - State of Kansas
CAREN J. WINCHELL
My Appt. Exp. 6-21-91

Caren J. Winchell
Notary Public

My Commission Expires: June 21, 1991

Form CP-4
Revised 07-86