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

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

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

API NUMBER 15-033-20,468-0000

LEASE NAME Delaney

WELL NUMBER #1

_____ Ft. from S Section Line

_____ Ft. from E Section Line

SEC. 36 TWP. 31S RGE. 18W (E) or (W)

COUNTY Comanche

Date Well Completed 2-3-67

Plugging Commenced 6-27-00

Plugging Completed 7-11-00

LEASE OPERATOR Pratt Well Service, Inc.

ADDRESS P.O. Box 847

PHONE #(316)672-2531 OPERATORS LICENSE NO. 5893

Character of Well oil

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

The plugging proposal was approved on _____ (date)

by _____ (KCC District Agent's Name).

Is ACO-1 filed? no If not, is well log attached? do not have one

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

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
	Surface pipe			10 3/4"	268'	0
	casing			4 1/2"		27 Jts

Describe in detail the manner in which the well was plugged, indicating where the mud fluid wa 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 set bridge plug @ 4950', fluid level was 2350' from surface. cut 4 1/2" casing @ 1102' and pulled a 20' Jt. set plug @ 1080' and pumped 50 sks cement. pulled 4 1/2" casing and set 2nd plug @ 295'. pumped 40 sks of cement and pulled all but 1 jt of casing and circulated 10 sks cement. pulled remaining casing for total of 27 jts pulled. used 4 sks of hulls, 200 sks of 60/40 poz and 20 sks of 6% get. Used a total of 210 sks cement and 38 sks get.

Name of Plugging Contractor Pratt Well Service, Inc. License No. 5893

Address P.O. Box 847 Pratt, KS 67124

NAME OF PARTY RESPONSIBLE FOR PLUGGING FEES: Pratt WEll Service, Inc.

STATE OF Kansas COUNTY OF Pratt ,ss.

Amy Robertson, Production Clerk (Employee of Operator) or (Operator) o 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 tha the same are true and correct, so help me God.

(Signature) Amy Robertson

(Address) P.O. Box 847 Pratt, KS 67124

KEVIN C. GATES
Notary Public - State of Kansas
My Appt. Expires

SUBSCRIBED AND SWORN TO before me this 26 day of July, 2000

Kevin C. Gates
Notary Public

My Commission Expires: 3/13/04

RECEIVED
AUG 16 2000
8-16-00
CONSERVATION DIVISION

Revised 05-8