STATE OF KANS			PLUGGING REC	ORD	api nui	IBER _	15- 003 -2	1/133		
STATE CORPOR	RATION		K.A.R. 82-3-117			LEASE NAME Brass				
130 South Marke	et Room 2078		TYPE OR PRINT			LEASE NAME <u>Brass</u>				
Wichita, Kansas	67202 RF	CENTERIOTIC	NOTICE: Fill out completely			WELL NUMBER <u>#1-5</u>				
÷]-		affice within 60 days			Ft. from N / S Section Line				
		WICHITA			610		Ft. from I	E / W Section Lin		
LEASE OPERAT	OR Pelican Hills	oil & Gas			SEC. <u>5</u>	_ TWP	32S_ R	GE. <u>17</u> (E) or		
ADDRESS 1401 N. ElCamino, Suite 202, SanClemente, CA						COUNTY Comanche				
PHONE # 949-269-9052 OPERATOR'S LICENSE NO. 31120						Date Well Completed				
Character of Well Good						Plugging Commenced 8/27/2003				
(Oil, Gas, D&A, SWD, Input, Water Supply Well)						Plugging Completed 8/29/2003				
•	posal was appro		03			,		(da		
by Kevin Stru						(KCC Dist	trict Agent's Nam		
	es If not, is v	vell log attached	? no			\		J		
Producing Formation Miss Depth to Top 5130 Bottom 5168 T. D. 5287										
•	thickness of all w									
OIL, GAS, OR \	NATER RECORI	os			ASING RE					
Formation	Content	From	То	Size		Put in		Pulled out		
			1							
		 				3207		5400		
troducing it into the each set. Set CIBP at 5075,	e hole. If cement or dump 2 sacks port	r other plugs were land cement with d	used, state the char lump bailer, stretch	acter of	f same and t 5 ½ at 340	depth pla 0, lay dov	wn 5 ½,	feet to fee		
cement, 60/40 6%		Put in Pulled out 20 75 None 8 5/8 684 None 5 1/2 5287 3400 Pulled out 5 1/2 5287 Pulled out 5 1/2 5287 Pulled out 5 1/2 5287 Pulled out 5 1/2 Pu								
-		(If additional desc	ription is necessary, u	se BACI	K of this form.	.)				
				•						
					L	License I	No. <u>510</u>)5		
			Lodge, KS 67104		01.9.0=					
NAME OF PARTY RESPONSIBLE FOR PLUGGING FEES: Pelican Hills Oil & Gas STATE OF Kansas COUNTY of Barber , ss.										
STATE OF Kans		COUNTI					, SS. wa dasarib	ed well, being first		
•		e knowledge of the	= (Employee of Operation);	,	` •	•				
-	illed that the same			ma mai	ters herein v	comanico		ng of the above-		
described well as I	med that the same	•		10	1/	4				
	GLENDA MORRISON NOTARY PUBLIC STATE OF KANSAS My Appl Exp. (1/3-)		Inature) P O Bo	1 127	Medicine	l odge k	CS 67104			
	SORSO	CKIBED AND SW				· —	Septe	ember 2003		
		Section .		Tle	no y	otary Pul	olic			
	እለъ	Commission Evni	res: November 3	n 2006		-		Br		

My Commission Expires: November 30, 2006