

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 15-033-21252-0000

LEASE NAME MIDGE HERD

WELL NUMBER 23-4

330 Ft. from N Section Line

330 Ft. from W Section Line

SEC 23 TWP 32S RGE 19 West

COUNTY COMANCHE

Date Well Completed 8/28/2001

Plugging Commenced 8/28/2001

Plugging Completed 8/28/2001

RECEIVED
SEP 19 2001
9-19-01
KCC WICHITA

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

LEASE OPERATOR Samuel Gary Jr. & Associates, Inc.

ADDRESS 1670 Broadway, Suite 3300 Denver, CO 80202-4838

PHONE # (303) 831-4673 OPERATORS LICENSE NO. 3882

Character of Well D&A

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

The plugging proposal was approved on 8/24/2001 (date)

by Richard Lacey (KCC District Agent's Name).

Is ACO-1 filed? NO If not, is well log attached? No, well logs will be filed with ACO-1 due by 12/10/01.

Producing Formation _____ Depth to Top _____ Bottom _____ T.D. 5940'

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	82'	20"	8/10/01	NONE
		surface	683'	8-5/8"	8/14/01	NONE

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.

1st Plug : 50 sacks of cement (through drillpipe) @ 1000'

2nd Plug : 50 sacks of cement (through drillpipe) @ 700'

3rd Plug : 10 sacks @ 40' to surface

15 sacks of cement in the Rathole ; 10 sacks of cement in the Mousehole

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

Name of Plugging Contractor Duke Drilling Co., Inc. License No. 5929

Address PO Box 823 Great Bend, Kansas 67530

NAME OF PARTY RESPONSIBLE FOR PLUGGING FEES: Samuel Gary Jr. & Associates, Inc.

STATE OF COLORADO COUNTY OF DENVER, ss.

Thomas G. Fertal (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) Thomas G. Fertal

(Address) 1670 Broadway, Suite 3300 Denver, CO 80202

SUBSCRIBED AND SWORN TO before me this 17th day of September, 2001

Laura E. Alarid
Notary Public

My Commission Expires:
LAURA E. ALARID
NOTARY PUBLIC
STATE OF COLORADO

My Commission Expires 03/28/2005

~~LAURA E. ALARID~~
~~NOTARY PUBLIC~~
~~STATE OF COLORADO~~

~~Expires 03/28/2005~~

Form CP-4
Revised 05-88

OR