

STATE OF KANSAS
STATE CORPORATION COMMISSION
130 S. Market, Room 2070
Wichita, KS 67202

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

15-009-04012-0000
API NUMBER 02-04-56

LEASE NAME Hoeffner

WELL NUMBER 3

3300
3965 Ft. from S Section Line

2310
1320E Ft. from E Section Line

SEC. 32 TWP. 17S RGE. 12W (E) or (W)

COUNTY Barton

Date Well Completed _____

Plugging Commenced 12-04-2000

Plugging Completed 12-04-2000

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

LEASE OPERATOR John Roy Evans

ADDRESS P.O. Box 385 Claflin KS 67525

PHONE (316) 587-3563 OPERATORS LICENSE NO. 7030

Character of Well Oil

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

The plugging proposal was approved on 12-04-2000 (date)

by Jay Pfeifer (KCC District Agent's Name)

Is ACO-1 filled? Yes If not, is well log attached? _____

Producing Formation _____ Depth to Top 2937' Bottom 3131' T.O. 3345'

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

OIL, GAS OR WATER RECORDS

CASING RECORD

Formation	Content Surface	From	To	Size	Put In	Pulled out
		-0-	717'	8 5/8"	717'	None
	Production	-0-	3345'	5 1/2"	3345'	1972.80'

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. Bottom plug, sand & cement 2887'. Allied 1st plug @ 1500' mixed 100 sacks cement 60/40 10% gel with 300# hulls, 2nd plug @ 850', mixed 40 sacks cement with 200# hulls and 3rd plug @ 350' mixed 50 sacks cement to circulate. Job started 11:00 a.m. and completed 1:00 p.m.

Name of Plugging Contractor D.S. & W. Well Servicing, Inc. License No. 6901

Address P.O. Box 231 Claflin, KS 67525

RECEIVED
STATE CORPORATION COMMISSION

NAME OF PARTY RESPONSIBLE FOR PLUGGING FEES: John Roy Evans

STATE OF Kansas COUNTY OF Barton, ss.

DEC 21 2000
12-21-00

Joseph F. Strube (Employee of Conservation Division)
above-described well, being first duly sworn on oath, says: That I have known the facts stated, and matters herein contained and the log of the above-described well as filed and the same are true and correct, so help me God.

(Signature) Joseph F. Strube

(Address) P.O. Box 231 Claflin, KS 67525

SUBSCRIBED AND SWORN TO before me this 12th day of December, 192000

Brenda Urban
Notary Public
My Commission Expires: Nov. 14, 2001

BRENDA URBAN
Notary Public, State of Kansas
My Appt. Expires Nov 14, 2001

Form 9
Revised 05-