

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

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

API NUMBER 15-009-20,845-00.00

LEASE NAME Allen

WELL NUMBER 2-D

3630 S Ft. from S Section Line

3630'E Ft. from E Section Line

SEC. 25 TWP. 16 RGE. 13 (E) or (W)

COUNTY Barton

Date Well Completed _____

Plugging Commenced 06-26-2000

Plugging Completed 06-26-2000

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

LEASE OPERATOR Richlan Drilling

ADDRESS 598 2nd Ave Beaver, KS 67517

PHONE# 316, 587-3224 OPERATORS LICENSE NO. 31086

Character of Well 2 D

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

The plugging proposal was approved on 06-26-2000 (date)

by Jay Pfeifer (KCC District Agent's Name).

Is ACO-1 filed? Yes if not, is well log attached? _____

Producing Formation _____ Depth to Top 3377 Bottom 3380 T.D. 3399

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-	350	8 5/8"	350	None
	Production	-0-	3419	5 1/2"	3419	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 plug were used, state the character of same and depth placed, from _____ feet to _____ feet each set. Bottom plug, sand & cement 3327'. Allied pumped 145 sacks cement 60/40 10% gel @ 1800', circulated to surface. Pulled tubing & topped off with 25 sacks cement. Job started 10:45 a.m. and completed 12:00 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: Richlan Drilling, Inc.

STATE OF Kansas COUNTY OF Barton, ss.

JUL 07 2000

Joseph F. Strube (Employee of Operator) Wichita, Kansas (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 the 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 30th day of June, 19 2000

Brenda Urban
Notary Public

My Commission Expires: Nov 14, 2001

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

Form CP-1
Revised 05-88

AR