

TATE OF KANSAS
TATE CORPORATION COMMISSION
30 S. Market, Room 207B
Wichita, KS 67202

WELL PLUGGING RECORD
K.A.R.-02-3-117

API NUMBER 15-009-24.122-00.00

LEASE NAME McLean #1

WELL NUMBER _____

_____ Ft. from S Section Line

_____ Ft. from E Section Line

SEC. 24 TWP. 17 RGE. 11W (E) or (W) (W)

COUNTY Barton

Date Well Completed _____

Plugging Commenced 9-28-00

Plugging Completed 10-2-00

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

LEASE OPERATOR Grady Bolding Corporation

ADDRESS P.O. Box 486 Ellinwood, Kansas 67526

PHONE (316) 564-2240 OPERATORS LICENSE NO. 7383

Character of Well OIL

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

The plugging proposal was approved on _____ (date)

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

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

Producing Formation _____ Depth to Top _____ Bottom _____ T.D. 3356'

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

OIL, GAS OR WATER RECORDS | CASING RECORD

RECEIVED
STATE CORPORATION COMMISSION

Formation	Content	From	To	Size	Put In	Pulled out
				8-5/8"	343'	None
				5-1/2"	3351'	2406'

OCT 6 2000
CONSERVATION DIVISION
Wichita, Kansas

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 section. Plugged off bottom with sand to 2975' and 5 sks. cement. Shot pipe loose @2406', pulled up to 1425', pumped 100 sks. cement and 300# hulls, pulled up to 625', pumped 40 sks. cement and 100# hulls, pulled to 250', circulated 55 sks. cement to surface 60/40 pos. 10% gel. Plugging Complete.

Name of Plugging Contractor Mike's Testing & Salvage, Inc. License No. 31529

Address P.O. Box 467 Chase, Kansas 67524

NAME OF PARTY RESPONSIBLE FOR PLUGGING FEES: Grady Bolding Corporation

STATE OF Kansas COUNTY OF Rice, ss.

Mike Kelso (Employee of Operator) or (Operator) above-described well, being first duly sworn on oath, says: That I have knowledge of the fact statements, and matters herein contained and the log of the above-described well as filed to the same are true and correct, so help me God.

(Signature) [Signature]

(Address) P. O. Box 467 Chase, KS 67524

SUBSCRIBED AND SWORN TO before me this 5th day of October 2000

[Signature]
Notary Public

My Commission Expires: _____

IRENE HERZBERG
State of Kansas
My Appt. Exp. Aug. 24, 2001

Form CP
Revised 05-