

STATE OF KANSAS
STATE CORPORATION COMMISSION
200 Colorado Dorby Building
Wichita, Kansas 67202

WELL PLUGGING RECORD
K.A.R.-02-3-10

CONSERVATION DIVISION
Wichita, Kansas

API NUMBER 151-21567-00-01

RECEIVED
STATE CORPORATION COMMISSION

LEASE NAME Tobias

WELL NUMBER A-1 "OWWO"

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

1650 Ft. from S Section Line

1650 Ft. from E Section Line

LEASE OPERATOR Woodman-Iannitti Drlg. Co.

SEC. 30 TWP. 26 SRGE. 13 X 2 (W)

ADDRESS P. O. Box 308, Gt. Bend, KS 67530

COUNTY Pratt

PHONE (316) 792-2921 OPERATORS LICENSE NO. _____

Date Well Completed 9-8-93

Character of Well D & A

Plugging Commenced 9-8-93

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

Plugging Completed 9-8-93

The plugging proposal was approved on September 8, 1993 (date)

by Steve Middleton (KCC District Agent's Name).

Is ACO-1 filled? Yes If not, is well log attached? No

Producing Formation _____ Depth to Top _____ Bottom T.D. 1463'

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
				<u>8 5/8"</u>	<u>434'</u>	<u>None</u>

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. Spotted 50 sx. cement at 910' thru drill pipe. Spotted 50 sx. cement at 460' thru drill pipe. Spotted 10 sx. cement at 40' thru drill pipe. Spotted 15 sx. cement in rathole. 10 sx. cement in water well.

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

Name of Plugging Contractor White & Ellis Drilling, Inc. License No. 5420

Address P. O. Box 48848, Wichita, KS 67201-8848

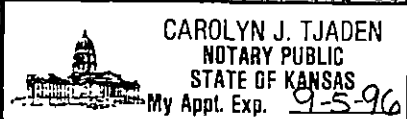
NAME OF PARTY RESPONSIBLE FOR PLUGGING FEES: Woodman-Iannitti Drilling Co.

STATE OF KANSAS COUNTY OF SEDGWICK, ss.

Michael L. Considine (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) Michael L. Considine

(Address) P. O. Box 48848
Wichita, KS 67201-8848



SUBSCRIBED AND SWORN TO before me this 13th day of September, 19 93

Carolyn J. Tjaden
Notary Public

My Commission Expires: 9-5-96