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

| WELL | PLU | JGG | I NG | RE | CORD |
|------|-----|-----|------|-----|------|
| K. | A.F | ₹ | 82-3 | 5-1 | 17 |

| API NUMBER 15-151-21,761-00- |
|------------------------------|
|------------------------------|

| LEASE | NAME_ | ZINK | ''A'' | |
|-------|-------|------|-------|--|
| | | | | |

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

WELL NUMBER 1

330 Ft. from S Section Line

| _330 | | | | |
|------|-----------|----|---------|-------|
| sec4 | TWP.26 SR | GE | L1 XXXX | CW KZ |

ADDRESS 155 N. Market, Suite 1000, Wichita, KS 67202

county Pratt

PHONE#(316) 269-7600 OPERATORS LICENSE NO. 5171

Date Well Completed 1-30-86

Character of Well D&A

LEASE OPERATOR TXO Production Corp.

Plugging Commenced 1-30-86

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

Plugging Completed 1-30-86

Did you notify the KCC/KDHE Joint District Office prior to plugging this well? Yes

Which KCC/KDHE Joint Office did you notify? 1117kmown

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

Producing Formation _____ Depth to Top ____ Bottom T.D. 4170'

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

| UIL | GAS | UR | WAIER | RECORDS |
|-----|-----|----|-------|---------|
| | | | | |

CASING RECORD

| Formation | Content | From | То | Size | Put in | Pulled out |
|-----------|---------|----------|----|--|--------|------------|
| | | | - | 8-5/8'' | 430' | 0 |
| | | <u> </u> | - | <u> </u> | | |
| | | | | | 1 | |

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.

Plugged well w/60-40 Pozmix, 3% CaCl: 50 sxs @ 900', 50 sxs @ 470', 10 sxs &

bridge @ 40', 10 sxs in mousehole, & 10 sxs in rathole.

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

Name of Plugging Contractor FWA Drilling Co., Inc. License No. 6165

Address P.O. Box 850980, Yukon, OK 73085

STATE OF COUNTY OF

(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)

arket Suite 1000 _

(Address) SUBSCRIBED AND SWORN TO before me this 4

My Commission Expires: 10-4-89

Notary Publ/c

RECEIVED

STATE CORPORATION COMMISSION FORM CP-4

5 1986 Revised 08-84

CONSERVATION DIVISION

Chyrl A. Delay NOTARY PUBLIC State of Kansas MY APPT. EXPIRES 10-4