

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

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

API NUMBER 15-151-20,112-01-07

LEASE NAME Dikeman

WELL NUMBER 1

1650 Ft. from S Section Line

4335 Ft. from E Section Line

SEC. 5 TWP. 27 RGE. 12W (E) or (W)

COUNTY Pratt

Date Well Completed _____

Plugging Commenced 5-27-03

Plugging Completed 6-3-03

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

EASE OPERATOR Bullseye Oilfield Service, Inc.

ADDRESS P.O. Box 8778 Pratt, Kansas 67124

PHONE (620) 672-1610 OPERATORS LICENSE NO. 31056

Character of Well OWWO

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

The plugging proposal was approved on _____ (date)

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

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

Producing Formation _____ Depth to Top _____ Bottom _____ T.D. 4512'

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
				8-5/8"	671'	None
				5-1/2"	4512'	2410'

Describe in detail the manner in which the well was plugged, indicating where the mud fluids placed and the method or methods used in introducing it into the hole. If cement or other plugging material is used, state the character of same and depth placed, from _____ feet to _____ feet each section. Plugged off bottom with sand to 4250' and 5 sacks cement. Shot pipe loose @2410', pulled up to 700', pumped 10 sacks gel with 50 sacks cement, pulled up to 300', pumped 40 sacks cement, layed pipe down, ran it back in and circulated 15 sacks cement to surface. 60/40 pos. 6% 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: Bullseye Oilfield Service, Inc.

STATE OF Kansas COUNTY OF Rice, ss.

Mike Kelso (Employee of Operator) or (Operator)

of above-described well, being first duly sworn on oath, says: That I have knowledge of the facts and 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 9th day of June, 2003

[Signature]
Notary Public

My Commission Expires:



Form C
Revised 05-