

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

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

API NUMBER 15-025-20,894.0001

LEASE NAME Gardiner

WELL NUMBER 2

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

1980' Ft. from S Section Line

1980' Ft. from E Section Line

SEC. 8 TWP. 34 RGE. 24 (X) or (W)

COUNTY Clark

LEASE OPERATOR Kansas Petroleum Inc.

ADDRESS 225 N. Market, Suite 310, Wichita, Ks.

PHONE# (316) 267-2266 OPERATORS LICENSE NO. 5023

Character of Well Gas

Date Well Completed 8-16-85

Plugging Commenced 7-23-1991

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

Plugging Completed 7-23-1991

The plugging proposal was approved on 7-19-1991 (date)

by Mr. Richard Lacey (KCC District Agent's Name).

Is ACO-1 filed? yes If not, Is well log attached? \_\_\_\_\_

Producing Formation Miss/Chester Depth to Top 5459 Bottom 5505 T.D. 5686'

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
Surface				8 5/8"	549'	0'
Production				4 1/2"	5686	4000'

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.

Pump 2 Sks. hulls and 20 Sks. cement to 5300' - Pressured to 600 lbs.

Pump 50 Sks. cement 1100' to 950' - Mud to 580' - Pump 50 Sks. cement 580' to 430'

Mud to 40' - Put bridge and 10 Sks. cement 40' to 5'

Cut off 8 5/8", 5' below ground level and cap.

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

Name of Plugging Contractor MIDWEST CASING PULLING SERVICE License No. 6497

Address Box f, Sublette, Ks. 67877

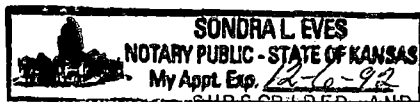
NAME OF PARTY RESPONSIBLE FOR PLUGGING FEES: Kansas Petroleum Inc.

STATE OF KANSAS COUNTY OF HASKELL, ss.

I, Edgar J. Eves (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) Edgar J. Eves

(Address) Box F, Sublette, Ks. 67877



SUBSCRIBED AND SWORN TO before me this 25th day of July, 19 91

Sondra L. Eves  
Notary Public

My Commission Expires: 12-6-92