

STATE OF KANSAS
STATE CORPORATION COMMISSION
130 S. Market, Room 2125
Wichita, Kansas 67202

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

15-119-10333-0000
API NUMBER Drilled 1959

LEASE NAME Adams

WELL NUMBER A-1

4620 Ft. from S Section Line

1980 Ft. from E Section Line

SEC. 35 TWP. 34 SRGE. 30 (X) or (W)

COUNTY Medde

Date Well Completed 10-25

Plugging Commenced 10-23-95

Plugging Completed 10-25-95

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

LEASE OPERATOR Graham-Michaelis Corp.

ADDRESS P. O. Box 247, Wichita, KS 67201

PHONE# (316) 264-8394 OPERATORS LICENSE NO. 5134

Character of Well Gas

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

The plugging proposal was approved on 10-23-95 (date)

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

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

Producing Formation Mississippian Depth to Top _____ Bottom _____ T.D. _____

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
		1488	0	8 5/8		
		6040	0	5 1/2		2817

Describe in detail the manner in which the well was plugged, indicating where the mud fluid placed and the method or methods used in introducing it into the hole. If cement or other pl were used, state the character of same and depth placed, from _____ feet to _____ feet each s Mixed 3 5x hulls to 25 5x cmt. to plug perf's from 5919 to 5719. Mixed 50 5x plug @ bottom of 8 5/8 from 1510 to 1360. Mixed 40 5x plug from 750 to 650. Mixed 10 5x 33 to 3. Cut off & capped 8 5/8 3 ft. below ground level. Used mud between all plugs.

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

Name of Plugging Contractor Sargent And Horton Plugging, Inc. License No. 31151

Address Rt. 1, Box 49 BA Tyrone, OK 73951-9731

NAME OF PARTY RESPONSIBLE FOR PLUGGING FEES: Graham-Michaelis Corp.

STATE OF Kansas COUNTY OF Sedgwick, ss.

STATE RECEIVED
CORPORATION COMMISSION
NOV 13 1995
11-13-95

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

(Signature) David J Patterson

(Address) P.O. Box 247, Wichita, KS 67201



SWORN TO before me this 10 day of Nov., 1995

Glenda G. Newell
Glenda G. Newell, Notary Public

My Commission Expires: 7/2/97