

STATE OF KANSAS  
STATE CORPORATION COMMISSION  
130 S. Market, Room 2073  
Wichita, Kansas 67202

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

API NUMBER 15-189-20166-0000

LEASE NAME Roehr

WELL NUMBER 1-36

3300 Ft. from S Section Line

660 Ft. from E Section Line

SEC. 36 TWP. 34 RGE. 36 (E) or (W)

COUNTY Stevens

Date Well Completed \_\_\_\_\_

Plugging Commenced 6-4-99

Plugging Completed 6-9-99

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 6-4-99 (date)

by Richard Lacy (KCC District Agent's Name).

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

Producing Formation \_\_\_\_\_ 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
				8 3/8	1698	-
				4 1/2	6614	2431

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.

Mixed 2 Sx hulls & 20 Sx cmt. to plug perfs. from 6276 to 6076. Pumped plug thru 2 3/8. Recovered 2431 4 1/2. Mixed 50 Sx Plug from 2400 to 2250. Mixed 50 Sx Plug from 1700 to 1550, 40 Sx 700 to 600, 10 Sx 40 to 0. Cut off & capped 8 3/8 4 ft below G.L. 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 7-1-99

NAME OF PARTY RESPONSIBLE FOR PLUGGING FEES: Graham-Michaelis Corporation

STATE OF Kansas COUNTY OF Sedgwick, ss.

W. A. Michaelis, Jr. (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) W.A. Michaelis, Jr.

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

AND SWORN TO before me this 28 day of June, 19 99



Glenda G. Newell  
Glenda G. Newell Notary Public

My Commission Expires: 7/2/2001