STATE OF KANSAS API NUMBER 15-191-21530-0000 STATE CORPORATION COMMISSION · K.A.R.-82-3-117 200 Cólerado Derby Bullding LEASE NAME Weber Wichita, Kansas 67202 . WELL NUMBER 1 TYPE OR PRINT NOTICE: Fill out completely ____ Ft. from S Section Line and return to Cons. Div. office within 30 days. ft. from E Section Line SEC. 9 TWP. 35 SRGE. 2 W(5) or (W) LEASE OPERATOR W. L. Kirkman Inc. COUNTY Summer ADDRESS_P.O. Box 782290 Wichita KS 67218 2200 PHONE (316) 685-5372 OPERATORS LICENSE NO. 5673 Date Well Completed 6/7/83 Plugging Commenced 6/21/89 Character of Well Oil Plugging Completed $\frac{6/29/89}{}$ (OII, Gas, D&A, SWD, Input, Water Supply Well) The plugging proposal was approved on ______ _____(4ate) (KCC District Agent's Name). ls ACO-1 filed? ______ if not, is well log attached? ______ Producing Formation _____ Depth to Top_____ Bottom_____T.D._4706. Show depth and thickness of all water, oil and gas formations. CASING RECORD OIL, GAS OR WATER RECORDS Put In Formation From To Size Pulled out Content none 8 5/8 242 4706 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 bottom with sand to 4500', dumped 5 sacks cement Shot 037131 3511, 3114'. Circulated cement to surface W/ 100 sacks 60/40 2% gel. (if additional description is necessary, use BACK of this form.) Name of Plugging Contractor KELSO CASING PULLING, INC. License No. 6050 Address P.D. Box 347 Chase, KS 67524 STATE CORPORATION COMMISSION NAME OF PARTY RESPONSIBLE FOR PLUGGING FEES: W. L. Kirkman Inc. STATE OF___ Kansas .1111 2 5 1989 _____ COUNTY OF Rice 7-25-89 (Employee of Operator) CONSERVATION DIVISION R. Darrell Kelso 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) Rhayen Holos (Address) P.O. Box 347 Chase, KS 67524 SUBSCRIBED AND SWORN TO before me this 21 day of July 19 89 Notary Public

> State of Kamsas Appl. Etp. Aug. 15, 1989

My Commission Expires:

Form CP-4 Revised 05-88