

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

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

API NUMBER API 15-119-20912-0000

LEASE NAME PHILLIPS

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

WELL NUMBER 1

1980 Ft. from S Section Line

660 Ft. from E Section Line

SEC. 27 TWP. 32 RGE. 29 ~~29~~ <sup>XX</sup> (W)

COUNTY MEADE

Date Well Completed 7/10/94

Plugging Commenced 7/10/94

Plugging Completed 7/10/94

LEASE OPERATOR NATIONAL PETROLEUM RESERVES, INC.

ADDRESS 250 N. Rock Rd., Ste. 340, Wichita, KS. 67206

PHONE#(316) 681-3515 OPERATORS LICENSE NO. 9482

Character of Well D&A

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

The plugging proposal was approved on 7/10/94 (date)

by STEVE MIDDLETON (KCC District Agent's Name).

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

Producing Formation \_\_\_\_\_ Depth to Top \_\_\_\_\_ Bottom 5850' T.O. 5850'

Show depth and thickness of ~~water~~ water, oil and gas formations.

RECEIVED  
KANSAS CORPORATION COMMISSION  
08-05-94

OIL, GAS OR WATER RECORDS \_\_\_\_\_ CASING RECORD \_\_\_\_\_

Formation	Content	From	To	Size	Put in	Pulled out
				8 5/8"	1499	NONE

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 plug were used, state the character of same and depth placed, - from    feet to    feet each set  
1st plug at 1520' with 50 sx cement, 2nd plug at 500' with 50 sx cement, 3rd plug at 40' with 10 sx cement, 4th plug to circulate rathole with 10 sx cement, 5th plug to circulate mousehole with 5 sx cement; used 60/40 Pozmix 6% gel by Halliburton

Name of Plugging Contractor BEREDCO INC. License No. 5147

Address 401 E. Douglas, Ste. 402, Wichita, KS. 67202

NAME OF PARTY RESPONSIBLE FOR PLUGGING FEES: NATIONAL PETROLEUM RESERVES, INC.

STATE OF KANSAS COUNTY OF SEDGWICK, ss.

Ted C. Bredehoft (Operator) of above-described well, being first duly sworn on oath, says: That I have knowledge of the facts stated, 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) Ted C. Bredehoft

(Address) 250 N. Rock Rd., Ste. 340, Wichita, KS. 67206

SUBSCRIBED AND SWORN TO before me this 29th day of July, 19 94

Susan E. Bredehoft  
**SUSAN E. BREDEHOFT**  
NOTARY PUBLIC  
STATE OF KANSAS  
My Appt. Exp. 5-13-97

USE ONLY ONE SIDE OF EACH FORM  
My Commission Expires:

Form CP-4  
Revised 05-88

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

FORM CP-1  
Rev.03/92

WELL PLUGGING APPLICATION FORM  
(PLEASE TYPE FORM and File ONE Copy)

API # \_\_\_\_\_ (Identifier number of this well). This must be listed for wells drilled since 1967; if no API# was issued, indicate spud or completion date.

WELL OPERATOR \_\_\_\_\_ KCC LICENSE # \_\_\_\_\_  
(owner/company name) (operator's)

ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_

STATE \_\_\_\_\_ ZIP CODE \_\_\_\_\_ CONTACT PHONE # ( ) \_\_\_\_\_

LEASE \_\_\_\_\_ WELL# \_\_\_\_\_ SEC. \_\_\_\_\_ T. \_\_\_\_\_ R. \_\_\_\_\_ (East/West)

\_\_\_\_\_ SPOT LOCATION/QQQQ COUNTY \_\_\_\_\_

\_\_\_\_\_ FEET (in exact footage) FROM S/N (circle one) LINE OF SECTION (NOT Lease Line)

\_\_\_\_\_ FEET (in exact footage) FROM E/W (circle one) LINE OF SECTION (NOT Lease Line)

Check One: OIL WELL \_\_\_\_\_ GAS WELL \_\_\_\_\_ D&A \_\_\_\_\_ SWD/ENHR WELL \_\_\_\_\_ DOCKET# \_\_\_\_\_

CONDUCTOR CASING SIZE \_\_\_\_\_ SET AT \_\_\_\_\_ CEMENTED WITH \_\_\_\_\_ SACKS

SURFACE CASING SIZE \_\_\_\_\_ SET AT \_\_\_\_\_ CEMENTED WITH \_\_\_\_\_ SACKS

PRODUCTION CASING SIZE \_\_\_\_\_ SET AT \_\_\_\_\_ CEMENTED WITH \_\_\_\_\_ SACKS

LIST (ALL) PERFORATIONS and BRIDGEPLUG SETS: \_\_\_\_\_

ELEVATION \_\_\_\_\_ T.D. \_\_\_\_\_ PBDT \_\_\_\_\_ ANHYDRITE DEPTH \_\_\_\_\_  
(G.L./K.B.) (Stone Corral Formation)

CONDITION OF WELL: GOOD \_\_\_\_\_ POOR \_\_\_\_\_ CASING LEAK \_\_\_\_\_ JUNK IN HOLE \_\_\_\_\_

PROPOSED METHOD OF PLUGGING \_\_\_\_\_

(If additional space is needed attach separate page)

IS WELL LOG ATTACHED TO THIS APPLICATION AS REQUIRED? \_\_\_\_\_ IS ACO-1 FILED? \_\_\_\_\_

If not explain why? \_\_\_\_\_

PLUGGING OF THIS WELL WILL BE DONE IN ACCORDANCE WITH K.S.A. 55-101 et. seq. AND THE RULES AND REGULATIONS OF THE STATE CORPORATION COMMISSION.

LIST NAME OF COMPANY REPRESENTATIVE AUTHORIZED TO BE IN CHARGE OF PLUGGING OPERATIONS:

\_\_\_\_\_ PHONE# ( ) \_\_\_\_\_

ADDRESS \_\_\_\_\_ City/State \_\_\_\_\_

PLUGGING CONTRACTOR \_\_\_\_\_ KCC LICENSE # \_\_\_\_\_  
(company name) (contractor's)

ADDRESS \_\_\_\_\_ PHONE # ( ) \_\_\_\_\_

PROPOSED DATE AND HOUR OF PLUGGING (If Known?) \_\_\_\_\_

PAYMENT OF THE PLUGGING FEE (K.A.R. 82-3-118) WILL BE GUARANTEED BY OPERATOR OR AGENT

DATE: \_\_\_\_\_ AUTHORIZED OPERATOR/AGENT: \_\_\_\_\_  
(signature)