

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

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

API NUMBER 15-189-21,507-0000

LEASE NAME Lambert "A"

WELL NUMBER 2-11

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

1980 Ft. from S Section Line

3300 Ft. from E Section Line

SEC. 11 TWP. 31S RGE. 35 or W

COUNTY Stevens

Date Well Completed 7-11-91

Plugging Commenced 7-11-91

Plugging Completed 7-11-91

LEASE OPERATOR McCoy Petroleum Corporation

ADDRESS 110 S. Main, Suite 500

PHONE# (316) 265-9697 OPERATORS LICENSE NO. 5003

Character of Well D&A

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

The plugging proposal was approved on 7-11-91 (date)

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

Is ACO-1 filed? Yes If not, Is well log attached? _____

Producing Formation _____ Depth to Top _____ Bottom _____ T.D. 5900'

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
		0	1796	8-5/8"	1796	None

RECEIVED
 STATE CORPORATION COMMISSION
 AUG 28 1991
 WICHITA, KANSAS

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. Plug and abandon using 60-40 Pozmix, 6% gel. Set 1st plug @ 3200' w/100 sks cement. 2nd plug set @ 1800' w/50 sks cement. 3rd plug set @ 900' w/500 sks cement. 4th plug set @ 40' w/10 sks cement. 15 sks in rathole and 10 sks in mousehole. Plugging complete 7-22-91

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

Name of Plugging Contractor Sweetman Drilling, Inc. License No. 5003

Address 110 S. Main, Suite 500, Wichita, KS 67202

NAME OF PARTY RESPONSIBLE FOR PLUGGING FEES: McCoy Petroleum Corporation

STATE OF KANSAS COUNTY OF SEDGWICK, ss.

McCoy Petroleum Corporation (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) [Signature]

(Address) 110 S. Main, Suite 500
 Wichita, KS 67202

SUBSCRIBED AND SWORN TO before me this 21 day of August, 19 91
 DEBORAH ANN PAULUS
 NOTARY PUBLIC
 STATE OF KANSAS
 My Comm. Expires 1-8-92
Deborah Ann Paulus
 Notary Public