STATE OF Indiana

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STATE OF KANSAS STATE CORPORATION COMMISSION 200 Colorado Derby Building Wichita, Kansas 67702	WELL PLUGGING RECORD K.A.R82-3-117			API NUM	API NUMBER 15-129-216040000		
				Lease Name Speakman			
	TYPE OR PRINT NOTICE: Fill out completely and return to Cons. Div. office within 30 days.				WELL NUMBER 1-126		
				4,850	4,850 Ft. from S Section Line		
				660	660 Ft. from E Section Line		
LEASE OPERATOR Pioneer Oil Company				SEC. 26	SEC. 26 TWP. 32S RGE. 40W (B) or (W)		
Address_RR 4 Box 142B Lawtenceville, IL 62439				COUNTY	COUNTY Morton		
Phone (618) 943-5314 OPERATORS LICENSE NO. 32468				Date we	Date well completed 7/4/00		
Cbaracter of Well D&A				Pluggin	Plugging Commenced 7/6/00		
Oil, Gas, D&A, SWD, Input, Water Supply Well)				Pluggin	Plugging completed 7/6/00		
The plugging proposal was approved on 7/1/00						(date)	
by Steve Durrant				(KC	C District A	gent's Name).	
Is ACO-1 filed? yes I	not, <i>IS</i> well	log a	ttached? <u>Y</u>	es (with ACO-1	<u> </u>		
Producing Formation Dryhole Depth to Top					omT.i	o. 6,183 ft	
Show depth and thickness of all							
OIL, GAS OR WATER RECORDS	1			ASING RECO	RO		
Formation Content	From	To	Size	Put I n	Pulled out		
		<u> </u>	8 5/8"	1,633	0		
				<u> </u>			
Describe In detail the manner in	which the wel	l was	plugged,	indicating	where the	mud fluid was	
placed and the method or method were used, State the charact	er of same an	id dej	oth place	d, from	feet to	_feet each set	

Describe In detail the man placed and the method or were used, State the ch RIH w/ drill pipe to 3000'. Spot 100 sk

25 sk from 690' to 580'. Pull DP to 40', spot 10 sk from 40' to 0'. POH w/ DP. Plug rathole w/ 15	sk. Plug mousehole w/ 10 sk.
Total cement used 210 sk 60/40 pozmix w/ 6% gel.	RECEIVED
	STATE CORPORATION COMMIS
Name of Plugging Contractor Norseman Drilling	License No. 3779
Address_200 E. First St, Suite 307 Wichita, KS 67202	AUG 2 1 2000
NAME OF PARTY RESPONSIBLE FOR PLUGGING FEES: Pioneer Oil Company	CONSERVATION DIVISION
	Wichita, Kansas

George A. Payne (Employee of operator)or (Operator)of the of the 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 that the same are true and correct, so help me God. (Signature)~

COUNTY OF Warrick

7588 Marywood Drive Newburgh, IN 47630 (Address)

'33.

Subscribed and sworn to before me this day of August ,19 <u>0</u>0

Notary Public My commission expires: 2

Form CP-4

