

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

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

API NUMBER 15-191-20,832-0000

LEASE NAME Hirth #1

WELL NUMBER #1

990' Ft. from S Section Line

990' Ft. from E Section Line

SEC. 21 TWP. 30S RGE. 2 ~~W~~ (W)

COUNTY Sumner

Date Well Completed 11-11-76

Plugging Commenced 5-14-86

Plugging Completed 5-14-86

LEASE OPERATOR TXO Production Corp.

ADDRESS 155 N. Market, Suite 1000, Wichita, KS. 67202

PHONE#(316 269-7600 OPERATORS LICENSE NO. 5171

Character of Well Gas Well

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

Did you notify the KCC/KDHE Joint District Office prior to plugging this well? YES

Which KCC/KDHE Joint Office did you notify? Unknown

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

Producing Formation _____ Depth to Top _____ Bottom _____ T.D. 3213'

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
	Surface			8-5/8"	260'	
	Production			2-7/8"	103 jts	

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.

Load tubing, injection rate 4-1/2 BPM @ 100 psig. Pumped 25 sxs Class "A" cmt. Release plug started displacement, squeezed @ 1000 psig, perf @ 310', pumped down tubing to establish circ, circ cmt to surface w/ 85 sxs 60/40 poz w/ 4% gel. Plugging complete 5-14-86.

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

Name of Plugging Contractor Clarke Oilfield Services License No. 5105

Address 107 W. Fowler, Medicine Lodge, Kansas 67104

STATE OF _____ COUNTY OF _____, ss.

(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) Jeffrey S. Childs

(Address) 155 N. Market, Suite 1000, Wichita, KS. 67202

SUBSCRIBED AND SWORN TO before me this 21st day of May, 19 86

Connie F. Koehler
Notary Public

RECEIVED
STATE CORPORATION COMMISSION

MAY 22 1986

CONSERVATION DIVISION MY Commission Expires: July 10, 1988
Wichita, Kansas

Connie F. Koehler
NOTARY PUBLIC
State of Kansas
MY APPT. EXPIRES 7/10/88

Form CP-4
Revised 08-84