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

STATE OF KANSAS STATE CORPORATION COMMISSION 130 S. Market, Room RECEIVED Wichita, KS 67202 RECEIVED

SEP 1 9 2003 KCC WICHITA

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

API NUMBER	15-119-21109-00-00
LEASE NAME	Isaac Trust B Unit

WELL	NUMBER	1-35

554	†ਜ	from	S	Section	т.

2086 Ft. from E Section Line

LEASE OPERATOR McCoy Petroleum Corp.			SEC. 35 TWP. 33 S RGE. 28 E 🛛 E 🔀 W					
ADDRESS 453	ADDRESS 453 S. Webb Rd., Suite 310, Box 780208 Wichita KS 67278			7278	COUNTY Meade			
PHONE # (316) 636-	2737 OPERATORS L	ICENSE N	o	5003	Date We	ll Completed	P&A	
Character of Well	dry hole				Pluggin	g Commenced	9/2/03	
(Oil, Gas, D&A, SW	D, Input, Water Su	pply Wel	1)		Pluggin	g Completed	9/2/03	
The plugging propo	osal was approved o	n			8/28/03 (date)			
by Steve Middleton				(KCC District Agent's Name),				
Is ACO-I filed?	XIf not,	Is well	log a	ttached?_	X		<u> </u>	
Producing Formatio	n	Depth	to T	op	Bott	omT.1	D. <u>3450'</u>	
Show depth and thi	ckness of all wate	r, oil a	nd ga	s formati	ons.			
OIL, GAS OR WATER	OIL, GAS OR WATER RECORDS			CASING RECORD				
Formation	Content	From	To	Size	Put In	Pulled out		
Surface				8 5/8	938'	938'		
						,		
						·		
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. Rig up Post & Mastin and plugged with 235 sx 60/40 Pozmix as follows: 100 sacks at 3130', 50 sacks at 968', 50 sacks at 703' and 10 sacks at 40' to surface. Cemented rathole with 15 sacks and mousehole with 10 sacks.								
(If	additional descrip	otion is	neces	ssary, use	BACK of t	his form.)		
Name of Plugging C	ontractor	Post & Ma	stin Wel	l Service, Inc.		License No	NA_	
Address		Box	297, Ga	rden City, Ks 6	7846			
NAME OF PARTY RESE	ONSIBLE FOR PLUGGI	NG FEES			McCoy Po	etroleum Corp.		
STATE OF	Kansas co	UNTY OF _	_	Sedgwi	ck	_ss.		
<u>, </u>	Scott Hampel					Operator) o	r (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)								
,			(.	Address)	453 S. Webb	Rd., Suite 310, Box 780	0208 Wichita KS 67278	
· s	UBSCRIBED AND SWOR	N TO bef	ore me	e this <u>/</u>	The day of	Septem.	lus, 2003	
M	y Commission Expir	es	03	15-07	Not	ary Public	0 :	

DIANNE HOWARD

NOTARY PUBLIC
STATE OF KANSAS
My Appt. Exp

Form CP-4 Revised 05-88