

STATE OF KANSAS  
STATE CORPORATION COMMISSION  
D. S. Market, Room 2078  
Topeka, KS 67202

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

15-095-20082-0000

API NUMBER Drilled 1968

LEASE NAME Messenger

WELL NUMBER Q-2

           Ft. from S Section Line

           Ft. from E Section Line

SEC. 12 TWP. 30S RGE. 7W (E) or (W)

COUNTY Kingman

Date Well Completed           

Plugging Commenced 9-10-97

Plugging Completed 9-15-97

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

LEASE OPERATOR Universal Resources Corporation

ADDRESS 44 SE 20 Road Great Bend, Kansas 67530

PHONE# (316) 793-8471 OPERATORS LICENSE NO. 31378

Character of Well Oil

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

The plugging proposal was approved on            (date)

Bill Johnson

(KCC District Agent's Name)

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

Producing Formation            Depth to Top            Bottom            T.D. 4099'

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
				8-5/8"	235'	None
				5-1/2"	4099'	3009'

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 are used, state the character of same and depth placed, from            feet to            feet each section.  
Plugged off bottom with sand to 4025' and 5 sacks cement. Shot pipe @3217', 3009', pulled up to 1100', pumped 35 sacks cement, pulled to 750', pumped 35 sacks cement, pulled to 300', pumped 75 sacks cement to surface, topped off with 25 sacks, 60/40 pos. 4% gel  
Plugging Complete.

Name of Plugging Contractor Mike's Testing & Salvage, Inc. License No. 31529

Address P.O. Box 467 Chase, Kansas 67524

NAME OF PARTY RESPONSIBLE FOR PLUGGING FEES: Mike's Testing & Salvage, Inc.

STATE OF Kansas COUNTY OF Rice, ss.

Mike Kelso

(Employee of Operator) or (Operator)

Above-described well, being first duly sworn on oath, says: That I have knowledge of the facts and statements, and matters herein contained and the log of the above-described well as filed to the same are true and correct, so help me God.

(Signature) [Signature]

(Address) P. O. Box 467 Chase, KS 67524

SUBSCRIBED AND SWORN TO before me this 22nd. day of September, 1997

[Signature]  
Notary Public

My Commission Expires:           

