STATE OF KANSAS WELL PLUGGING RECORD STATE CORPORATION COMMISSION K.A.R.-82-3-117 API NUMBER 15-097-21,015-0000 260 Colorado Derby Building Wichita, Kansas 67202 LEASE NAME_Yohn_ TYPE OR PRINT WELL NUMBER __B-1 NOTICE: Fill out completely and return to Cons. Dlv. 660 Ft. from S Section Line office within 30 days. 660 Ft. from E Section Line LEASE OPERATOR Vincent Oil Corp. SEC. 23 TWP. 29 RGE 18 (XXX) or (W. COUNTY Kiowa ADDRESS 100 N. Main, Suite 500, Wichita, KS PHONE# (316) 262-3573 OPERATORS LICENSE NO. __5004 Date Well Completed Character of Well Good Plugging Commenced __7_25_94_ Plugging Completed 8-3-94 (Oli, Gas, D&A, SWD, Input, Water Supply Well) The plugging proposal was approved on 7-25-94_____ (date (KCC District Agent's Name). by Barlow Is ACO-1 filed? Ves If not, is well log attached? Producing Formation _____ Depth to Top_____ Bottom ______T.D. Show depth and thickness of all water, oil and gas formations. OIL, GAS OR WATER RECORDS CASING RECORD Formation From To Size Put in Pulled out Content 8 5/8 515 None 2800 4926 Describe in detail the manner in which the well was plugged, indicating where the mud fluid placed and the method or methods used in introducing it into the hole. If cement or other p were used, state the character of same and depth placed, from feet to feet each seem pumped bottom off with 100 hulls, 25sx cement, cut and pulled casing, pumped 300 hulls, 10sx gel, 50sx cement, 10 gel, 100 hulls, 8 5/8 plug, 150sx cement, 60/40 POZ, 6% gel at surface. (If additional description is necessary, use BACK of this form.) REGE WED5105 Name of Plugging Contractor_Clarke Corporation KANSAS CORPORATION COMMISSION Address P.O. Box 187, Medicine Lodge, KS 67104 NAME OF PARTY RESPONSIBLE FOR PLUGGING FEES: Vincent Oil AUG 0 5 1994 STATE OF Kansas COUNTY OF Barber (Employee of Woperator Jeff Sletto above-described well, being first duly sworn on cath, says: That I have knowledge of the fac statements, and matters herein contained and the log of the above-described well as filed the same are true and correct, so help me God. (Signature) **GLENDA MORRISON NOTARY PUBLIC** (Address) Medicine Lodge, KS 67104 STATE OF KANSAS L My Appl. Exp. Aug. 17, 1994 SUBSCRIBED AND SWORN TO before me this 4 ... day of August ,1994 Alonda Mourison Notary Public My Commission Expires: August 17, 1994