

ATE OF KANSAS
ATE CORPORATION COMMISSION
0 S. Market, Room 2078
chita, KS 67202

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

API NUMBER 15-129-20841-0000

LEASE NAME Kirkpatrick "A"

WELL NUMBER 1-21

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

660 Ft. from S Section Line

990 Ft. from ~~X~~^W Section Line

SEC. 21 TWP. 32 RGE. 42W (E) or (W)

COUNTY Morton

EASE OPERATOR Hugoton Energy Corporation

ADDRESS 4532 W. Jones Ave. Garden City, Ks. 67846

PHONE# (316) 262-1522 OPERATORS LICENSE NO. 3871

Character of Well Gas

Date Well Completed _____

Plugging Commenced 2-26-98

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

Plugging Completed 3-5-98

The plugging proposal was approved on _____ (date)

by Gary Winters (KCC District Agent's Name).

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

Producing Formation _____ Depth to Top _____ Bottom _____ T.O. 5400'

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"	1594'	None
				4-1/2"	5230'	2800'

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 4880' and 4 sacks cement. Shot pipe @3200', 3000' and 2800'. Pumped 200# nulls, 10 sks. gel, 50 sks. cement, 15 sks. gel, 175 sks. cement, 60/40 pos, 6% 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: Hugoton Energy, Corporation

STATE OF Kansas COUNTY OF Rice, ss.

Mike Kelso (Employee of Operator) or (Operator) of above-described well, being first duly sworn on oath, says: That I have knowledge of the facts and statements 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 10th day of March, 1998

[Signature]
Notary Public

My Commission Expires: _____

IRENE HERZBERG
State of Kansas
My Appt. Exp. Aug. 24, 2001

Form CP
Revised 05-

RECEIVED
KANSAS CORP COM
3-11-98
1998 MAR 11