

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

WELL NUMBER 1-2

3990 Ft. from S Section

4030 Ft. from E Section

SEC. 34 TWP. 29 SRGE. 32W (E) 0

COUNTY Haskell

LEASE OPERATOR Kansas Natural Gas, Inc.

ADDRESS P.O. Box 815 Sublette, KS 67877

PHONE (310) 675-8185 OPERATORS LICENSE NO. 5269

Date Well Completed 11-18-92

Character of Well Chase-Surface Pipe

Plugging Commenced 11-19-92

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

Plugging Completed 11-19-92

The plugging proposal was approved on November 19, 1992 (dr

by Mr. Richard Lacy, KCC, Dodge City, KS (KCC District Agent's Mar

is ACO-1 filed? yes If not, is well log attached? not logged - surface

Producing Formation surface-fresh water @ depth to Top 600' Bottom 600' T.D.

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
Fresh water	8 5/8" - 24#	surface	254'	8 5/8"	600'	346'

Describe in detail the manner in which the well was plugged, indicating where the mud flu placed and the method or methods used in introducing it into the hole. If cement or other were used, state the character of same and depth placed, from feet to feet each. Ran drill pipe to 600' T.D. and spotted a 50 sk plug of 65/35 POZ MIX + 6% gel and 2% cat. chl. + D-29 flakes. Pulled drill pipe out and hooked onto 8 5/8" to circulate 280 sks class "c" and calcium + D-29 flakes. From top to bottom 254' and back to surface on outside of 8 5/8". Good circulation back to surface. Also, put 15 sks class "c" in rat hole and 10 sks in mouse-hole to surface.

Name of Plugging Contractor Dowell Schlumberger of Ulysses License No.

Address Ulysses, KS

NAME OF PARTY RESPONSIBLE FOR PLUGGING FEES: Cheyenne Drilling Company

STATE OF Kansas COUNTY OF Haskell County, ss.

Kansas Natural Gas, Inc. (Employee of Operator) or (Operator) above-described well, being first duly sworn on oath, says: That I have knowledge of the facts stated herein and the log of the above-described well as filed the same are true and correct, so help me God.

(Signature) Steve Lehning

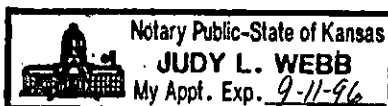
(Address) P.O. Box # 815 Sublette, Mo. 67877

SUBSCRIBED AND SWORN TO before me this 19 day of November 1992

Judy L. Webb
Notary Public

My Commission Expires: 9-11-96

USE ONLY ONE SIDE OF EACH FORM



RECEIVED
NOV 20 1992
11-20-92
Form Revised 0