

STATE OF KANSAS
 STATE CORPORATION COMMISSION
 200 Colorado Derby Building
 Wichita, Kansas 67202

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

API NUMBER 15-097-20977-0000

LEASE NAME Wotzke

WELL NUMBER 1

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

W/2W/2NE Ft. from S Section Line

_____ Ft. from E Section Line

SEC. 1 TWP. 28 SRGE. 16 (E) or (W)

COUNTY Kiowa

LEASE OPERATOR CMX

ADDRESS 1026 Union Center Wichita, KS 67202

PHONE (316) 267-6065 OPERATORS LICENSE NO. 3532

Date Well Completed 12-29-83

Character of Well Oil

Plugging Commenced 10-5-90

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

Plugging Completed 10-17-90

Did you notify the KCC District Office prior to plugging this well? yes

Which KCC Office did you notify? Dodge City

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

Producing Formation X Depth to Top X Bottom _____ T.D. 4775

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 | 466 | none |
| | | | | 5 1/2 | 4474 | 3000 |
| | | | | | | |
| | | | | | | |

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.
sand from 4775 to 4680 5sx Dump Bailor

BJ pumped 3-H-10-J -50-C -10J-H plug 125c 60-40 POZ 6% J

Steve-McJeff Clarke

(If additional description is necessary, use BACK of this form.)

Name of Plugging Contractor Clarke Corporation License No. 5105

Address Box 187 Medicine Lodge, KS 67104

STATE OF Kansas COUNTY OF Barber, ss.

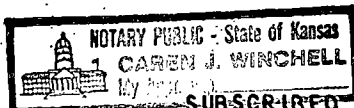
Elmo R. Morgenstern

(Employee of Operator) or (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) Elmo R. Morgenstern

(Address) Medicine Lodge, KS 67104



SUBSCRIBED AND SWORN TO before me this 18th day of October, 19 90

Caren J. Winchell
 Notary Public

My Commission Expires: June 21, 1991

OCT 22 1990

10-22-1990