WELL PLUGGING RECORD STATE OF KANSAS API NUMBER 15,097-20,840-0000 STATE CORPORATION COMMISSION K.A.R.-82-3-117 200 Colgrado Derby Building LEASE NAME CLARKSON Wichita, Kansas 67202 WELL NUMBER 1-25 TYPE OR PRINT NOTICE: Fill out completely and return to Cons. Div. 4620 Ft. from S Section Line office within 30 days. 1980 Ft. from E Section Line LEASE OPERATOR J. MARK RICHARDSON SEC. 25 TWP. 27 RGE.16W (E)or(W) ADDRESS 155 N. MARKET #840 WICHITA, KS. 67202 COUNTY KIOWA PHONE#(316) 262-3192 OPERATORS LICENSE NO. 5414 Date Well Completed 1/15/82 Plugging Commenced 12/11/91 Character of Well OIL Plugging Completed 12/19/91(Oll, Gas, D&A, SWD, Input, Water Supply Well) The plugging proposal was approved on 11/26/91\_\_\_\_(date) STEVE PFEIFER \_\_\_\_\_ (KCC District Agent's Name). is ACO-1 filed? YES If not, is well log attached?\_\_\_\_ Producing Formation Mississippi Depth to Top 4572-84 Bottom 4584-92T.D. 4669 Show depth and thickness of all water, oil and gas formations. OIL, GAS OR WATER RECORDS CASING RECORD KANSAS CURPORATION COMMISSION Size To Put In 400 Content From Pulled out Formation 8 5/8 400 Mississippi JAN 2 8 1992 2496 n 4669 41/2 4669 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 off to 4340 dump bail 4 sk cement, cut  $4\frac{1}{2}$  cs @ 2496, pump  $300\frac{\#}{4}$  hulls 10 sk gel, 50 sk 60/40 poz, 10 sk gel, 100# hulls, 8 5/8 plug 150 sk 60/40 poz max press 900# ISIP 300# (if additional description is necessary, use BACK of this form.) Name of Plugging Contractor GREENSBURG, WELL SERVICE License No.5414 (SAME AS ABOVE) Address 303 E. KANSAS, GREENSBURG, KS. 67054 NAME OF PARTY RESPONSIBLE FOR PLUGGING FEES: J. MARK RICHARDSON

J. MARK RICHARDSON (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)

\_\_ COUNTY OF \_\_ SEDGWICK

STATE OF KANSAS

(Address) 155 N. MARKET #50 WICHITA, KS. 67202

SUBSCRIBED AND SWORN TO before me this 20TH day of JANUARY ,19 92

My Commission Expires: 2/22/92 KIM SANTELLAN Notary Public