

STATE OF KANSAS
STATE CORPORATION COMMISSION
10 S. Market, Room 2078
Wichita, KS 67202

WELL PLUGGING RECORD
K.A.R.-02-3-117

API NUMBER 15-025-20,137-00-00

LEASE NAME Seacat "D"

WELL NUMBER 5

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

2130 Ft. from S Section Line

2585 Ft. from E Section Line

SEC. 31 TWP. 30S RGE. 21W (E) or (W)

COUNTY Clark

EASE OPERATOR Pickrell Drilling Co., Inc.

ADDRESS 100 S. Main, Suite 505 Wichita, Kansas 67202

PHONE#(316) 262-8427 OPERATORS LICENSE NO. 5123

Character of Well Oil

Date Well Completed _____

Plugging Commenced 7-18-01

Plugging Completed 7-19-01

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

The plugging proposal was approved on _____ (date)

By Steve Middleton (KCC District Agent's Name).

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

Reducing Formation _____ Depth to Top _____ Bottom T.D. 5319'

How 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"	619'	None
				4-1/2"	5306'	3127'

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 5170' and 4 sks. cement. Shot pipe @4000', 3700', 3400' and 3127'. Pulled up to 1200', pumped 10 sks. gel and 50 sks. cement, pulled up to 640', pumped 50 sks. cement, pulled up to 40' and pumped 20 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: Pickrell Drilling Co., Inc.

STATE OF Kansas COUNTY OF Rice, ss.

Mike Kelso

(Employee of Operator) or (Operator)

I, Mike Kelso, being first duly sworn on oath, says: That I have knowledge of the facts and statements, and matters 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 15th day of August XX 2001

[Signature]
Notary Public

My Commission Expires: _____



Form CR
Revised 05-

RECEIVED
8-16-2001
AUG 16 2001

KCC WICHITA