

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

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

15.009.24321.00.00
API NUMBER N/A

LEASE NAME Greensides

WELL NUMBER 1

1280 Ft. from S Section Line

1190 Ft. from E Section Line

SEC. 9 TWP. 18S RGE. 11W (E) or (W)

COUNTY Barton

Date Well Completed _____

Plugging Commenced 01-13-2000

Plugging Completed 01-13-2000

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

LEASE OPERATOR Kirby Krier Oil, Inc.

ADDRESS Rt. 1 Box 78A Claflin, KS 67525

PHONE/(316) 587-3810 OPERATORS LICENSE NO. 9951

Character of Well Oil

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

The plugging proposal was approved on 01-13-2000 (date)

by Jay Pfeifer (KCC District Agent's Name).

Is ACO-1 filled? Yes If not, Is well log attached? _____

Producing Formation _____ Depth to Top _____ Bottom _____ T.D. 3331'

Show depth and thickness of all water, oil and gas formations.

OIL, GAS OR WATER RECORDS

CASING RECORD

Formation	Content Surface	From -0-	To 339	Size 8 5/8"	Put in 339'	Pulled out None
	Production	-0-	3329	5 1/2"	3329'	2088.05'

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 plug were used, state the character of same and depth placed, from _____ feet to _____ feet each set. Bottom plug sand & cement 3279'. Allied mixed 125 sacks cement with 300E hulls @ 1350', 2nd @ 600' 25 sacks cement with 100# hulls, 3rd @ 250' to surface with 70 sacks cement & 100# hulls, 4th, topped off cellar with 10 sacks cement. Job started 10:15 p.m. and completed 11:15 p.m..

Name of Plugging Contractor D.S. & W. Well Servicing, Inc. License No. 6901

Address P.O. Box 231 Claflin, KS 67525

NAME OF PARTY RESPONSIBLE FOR PLUGGING FEES: Kirby Krier Oil, Inc.

STATE OF Kansas COUNTY OF Barton, ss.

Joseph F. Strube

(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 and the same are true and correct, so help me God.

(Signature) Joseph F. Strube

(Address) P.O. Box 231 Claflin, KS 67525

RECEIVED SUBSCRIBED AND SWORN TO before me this 20th day of January, 19 2000
STATE CORPORATION COMMISSION

Brenda Urban
Notary Public

JAN 25 2000 My Commission Expires: Nov 14 2001

CONSERVATION DIVISION
Wichita, Kansas

BRENDA URBAN
Notary Public - State of Kansas
My Appt. Expires Nov 14 2001

Form CP-1
Revised 05-88