

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

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

API NUMBER _____

LEASE NAME Luders

WELL NUMBER A-3

_____ Ft. from S Section Line

_____ Ft. from E Section Line

SEC. 13 TWP. 27 SRGE. 13 W. 6E (W)

COUNTY Pratt

Date Well Completed 8-28-54

Plugging Commenced 11-4-91

Plugging Completed 11-12-91

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

LEASE OPERATOR Martin Oil Producers, Inc.

ADDRESS 1010 Union Ctr. Bldg. Wichita, Ks. 67202

PHONE# (316) 264-0352 OPERATORS LICENSE NO. 5097

Character of Well Oil

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

The plugging proposal was approved on _____ (date)

by _____ (KCC District Agent's Name).

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

Producing Formation _____ Depth to Top _____ Bottom _____ T.D. 4345'

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

OIL, GAS OR WATER RECORDS

CASING RECORD

RECEIVED
STATE CORPORATION COMMISSION

| Formation | Content | From | To | Size | Put In | Pulled out |
|-----------|---------|------|----|--------|--------|------------|
| | | | | 8 5/8" | 375' | none |
| | | | | 5 1/2" | 4343' | 459' |
| | | | | | | |
| | | | | | | |

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CONSERVATION DIVISION
Wichita, Kansas

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.
Sanded bottom to 4120' ran 5 sacks cement. Shot @3113', 3103' pipe parted. Mixed 10 gel, 175 sacks 60/40 6% gel.

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

Name of Plugging Contractor KELSO CASING PULLING, INC. License No. 6050

Address P.O. Box 347 Chase, Kansas 67524

NAME OF PARTY RESPONSIBLE FOR PLUGGING FEES: Martin Oil Producers, Inc.

STATE OF Kansas COUNTY OF Rice, ss.

R. Darrell Kelso (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) [Signature]

(Address) P.O. Box 347 Chase, KS. 67524

SUBSCRIBED AND SWORN TO before me this 13 day of November, 19 91

[Signature]
Notary Public

My Commission Expires: _____

