

STATE CORPORATION COMMISSION
200 Colorado Derby Building
Wichita, Kansas 67202

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

API NUMBER 15-097-21093-0000

LEASE NAME Burkhardt A

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

WELL NUMBER X 2

4950 Ft. from S Section Line

990 Ft. from E Section Line

SEC. 26 TWP. 27 RGE. 18 (E) or (W)

COUNTY Kiowa

Date Well Completed 04-85

Plugging Commenced 10-13-95

Plugging Completed 10-16-95

LEASE OPERATOR Oil Producers, Inc. of Kansas

ADDRESS P.O. Box 8647, Wichita, Kansas 67208

PHONE# (316) 672-6373 OPERATORS LICENSE NO. 8061

Character of Well oil

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

The plugging proposal was approved on 10-13-95 (date)

by Steve Pfeifer (KCC District Agent's Name)

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

Producing Formation _____ Depth to top 4752 Bottom 4767 r.c. 4794

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
	Surface			8 5/8"	220	0
	Production			4 1/2"	4793'	2327'

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 sanded off to 4750' 4 sks of cement. Halliburton pumped 300 lbs. hulls. Pumped 10 sks of gel, 50 sks of cement, 10 sks of gel. Pumped 100 lbs. of hulls. Released 8 5/8" wood plug. Pumped 150 sks of cement. Maximum pressure 300 lbs. psi. Shut in pressure 150.

Name of Plugging Contractor D.S.& W. Well Servicing, Inc. License REC#16901

Address P.O. Box 231, Claflin, Kansas 67525 STATE CORPORATION COMMISSION
10-20-95

NAME OF PARTY RESPONSIBLE FOR PLUGGING FEES: Oil Producers, Inc. of Kansas OCT 20 1995

STATE OF Kansas COUNTY OF Barton, ss CONSERVATION DIVISION
Wichita, Kansas

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

(Signature) Joseph F. Strube

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

SUBSCRIBED AND SWORN TO before me this 19th day of October, 19 95

Karlynn K. Beck
Notary Public

My Commission Expires: 09-28-98

USE ONLY ONE SIDE OF EACH FORM

KARLYNN K. BECK
NOTARY PUBLIC
STATE OF KANSAS
MY APPT. EXPIRES 9-28-98

Form CP-4
Revised 05-88