

STATE OF KANSAS  
STATE CORPORATION COMMISSION  
101 S. Market, Room 2078  
Topeka, KS 67202

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

API NUMBER 15-155-010220000

LEASE NAME Catte <sup>KCC</sup>  
<sub>7-15-95</sub>

WELL NUMBER #1 ONWO

         Ft. from S Section Line

         Ft. from E Section Line

SEC. 22 TWP. 25S RGE. 9W (E) or (W)

COUNTY Reno

Date Well Completed 2-10-96

Plugging Commenced 12-9-98

Plugging Completed 12-10-98

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

LEASE OPERATOR Lebsack Oil Production, Inc.

ADDRESS P.O. Box 489 Hays, Kansas 67601

PHONE (316) 938-2396 OPERATORS LICENSE NO. 5210

Character of Well Oil

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

The plugging proposal was approved on          (date)

by Jack Luthi (KCC District Agent's Name).

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

Producing Formation          Depth to Top          Bottom T.O. 4646'

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
				8-5/8"	200'	None
				5-1/2"	2270'	2600'

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 material was used, state the character of same and depth placed, from          feet to          feet each side. Plugged off bottom with sand to 3760' and 5 sks. cement. Shot pipe @2810' and 2600'. pulled up to 1350', pumped 35 sks. cement, pulled to 800', pumped 35 sks. cement and 200# hulls, pulled to 250' and circulated 90 sks. cement to surface. Pulled rest of pipe and topped off with 10 sks. cement, 60/40 pos. 4% 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: Lebsack Oil Production, Inc.

STATE OF Kansas COUNTY OF Rice, ss.

Mike Kelso (Employee of Operator) or (Operator)

of above-described well, 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 14th day of December, 1998

[Signature]  
Notary Public

My Commission Expires:         

