KANSAS STATE CORPORATION COMMISSION

WELL PLUGGING SUPERVISOR'S REPORT

TO: Jewel M. Ogden, Director 500 Insurance Building 212 North Market √ichita 2, Kansas File No. 15-155-00075-000 Location: 7W. SW. Twp. 26 County: Rge._ Name of Field or Pool: Total Depth: 4/92 I have this date completed supervision of plugging of: Well No. Lease Operator's Full Name Complete Address: Plugging Contractor: License No. Abandoned Oil Well Gas Well ____Input Well SWD Well D. & A If well is a rotary drilled dry hole did operators wait for you to arrive_ If yes how long (Reason: Operation Completed: Hour 9:00 PMDay 23 Month The above well was plugged as follows: I hereby certify that the above well was plugged as herein stated and that I was present while the above well was being plugged. Signed: Well Plugging Supervisor I hereby state that I was not present while the above well was being plugged, however, to the best of my knowledge and belief it was plugged as herein stated. A full account for my not being present is as follows: CONSERVATION DIVISION Signed:

PLUGGING

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Hell Plugging Supervise

Wichita, Kansas

- Aure Broke Field Supervisor

Reviewed:

Remarks: 4