

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

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

API NUMBER 15-151-01,011-01

LEASE NAME Stelzer

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

WELL NUMBER #1 OTWO

1980 Ft. from S Section Line

1980 Ft. from E Section Line

LEASE OPERATOR Hess Oil Company

SEC. 7 TWP. 29 RGE. 14 ~~0800~~(W)

ADDRESS P.O. Box 1009, McPherson, KS 67460

COUNTY Pratt

PHONE# (316) 241-4640 OPERATORS LICENSE NO. 5663

Date Well Completed _____

Character of Well good

Plugging Commenced 1-24-95

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

Plugging Completed 2-8-95

The plugging proposal was approved on 10-12-95 (date)

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

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

Producing Formation Miss Depth to Top 4547 Bottom 4562 T.D. 4600

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	311	None
				5 1/2	4652	2375

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 section. Sand bottom to 4430, dump 5sx cement with dump bailer, cut and lay down 2375, 5 1/2 casing, weld 5 1/2 collar onto 8 5/8 and shut in until location dries up, Allied blow hole in surface, run tubing to 901, spot 50sx, pull tubing to 322 spot 50sx, pull tubing to 40, circulate cement to top with 25sx, 60/40, 6% gell

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

Name of Plugging Contractor Clarke Corporation

License No. 5105

Address P.O. Box 187, Medicine Lodge, KS 67104

2-13-95

NAME OF PARTY RESPONSIBLE FOR PLUGGING FEES: Hess Oil Company

STATE OF Kansas COUNTY OF Barber, ss.

Alan Vratil

(Employee of Operator) or Operator

above-described well, being first duly sworn on oath, says: That I have knowledge of the fact 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) Medicine Lodge, KS 67104



SUBSCRIBED AND SWORN TO before me this 9 day of February, 1995

Glenda Morrison
Notary Public

My Commission Expires: 10/14/98