WELL PLUGGING RECORD STATE OF MANSAS API NUMBER 15-155-20,621-0000 STATE CORPORATION COMMISSION K.A.R.-82-3-117 200 Colorado Derby Building LEASE NAME Gilroy Wichita, Kansase 67202 WELL NUMBER #1 TYPE OR PRINT NOTICE: Fill out completely 660 Ft. from S Section Line and roturn to Cons. Div. office within 30 days. 3300__ Ft. from E Section Line SEC.22 TWP. 25 RGE8 (E) or (W) LEASE OPERATOR Oil Producers, Inc. of Kansas ADDRESS Box 8647, Wichita, Kansas 67208 COUNTY Reno PHONE# (316)-672-3440 OPERATORS LICENSE NO. 8061 Date Well Completed Character of Well Gas Plugging Commenced 7-7-89 (Oli, Gas, D&A, SWD, input, Water Supply Well) Plugging Completed 7-17-89___ The plugging proposal was approved on ______ J uly 13, 1989 by _____ Merlan Unruh (KCC District Agent's Name). Is ACO-1 filed?______ If not, is well log attached? With application Producing Formation ______ Depth to Top_____ Bottom_____T.D. 3859 to ______ Show depth and thickness of all water, oil and gas formations. OIL, GAS OR WATER RECORDS CASING RECORD Formation Contont From Size Put In Pulled out 8-5/8" 245 None 1604.09 Describe in detail the manner in which the well was plugged, indicating where the mud fluid was placed and the mothod or methods used in introducing it into the hole. If cement or other plugs Dumped sand to 3760' and 5 sacks cement. Shot casing at 1600'. Pulled 41 joints of 4-1/2" casing. Howco plugged well with 25 sacks cement. 25 sacks cement. 100 sacks 60/40 pozmix cement with 6% gel. circulated to surface at 300'. .1111 2 4 1999 Name of Plugging Contractor Rockhold Engineering, Inc Contractor No. 5111 Address Box 698, Great Bend, Kansas 67530 NAME OF PARTY RESPONSIBLE FOR PLUGGING FEES: Oil Producers, Inc. of Kansas STATE OF Kansas

_ county of Barton

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 moll asyfiled that

(Signature)

IONA M. LEATHERMAN

Barton County, Kansas My Appt. Exp. 926-91

James W. Rockhold

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

My Commission Expires

(Address) <u>Box 698, Gt. Bend, Ks. 67530</u> SUBSCRIBED AND SWORN TO before me this 19th day of O. l. 1989 Notary Public Form CP-4

(Employee of Operator) or (Operator) of

James W. Rockhold