

STATE CORPORATION COMMISSION
200 Colorado Darby Building
Wichita, Kansas 67202

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

API NUMBER 15-151-21,045-0000

LEASE NAME Smith

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

WELL NUMBER 1-21

405 Ft. from S Section Line

3225 Ft. from E Section Line

SEC. 21 TWP. 26 SRGE. 15 (E) or (W)

COUNTY Pratt

Date Well Completed 02-26-96

Plugging Commenced 07-10-96

Plugging Completed 07-11-96

LEASE OPERATOR Thoroughbred Associates

ADDRESS 10 Colonial Ct., Wichita, Kansas 67207

PHONE#(316) 685-1512 OPERATORS LICENSE NO. 31514

Character of Well Oil

(oil, gas, O&A, SWD, Input, Water Supply Well)

The plugging proposal was approved on 07-10-96 (date)

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

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

Producing Formation Lansing Depth to top 4177 Bottom 4181 r.c. 4730

Show depth and thickness of all waters, oil and gas formations.

7-16-96

OIL, GAS OR WATER RECORDS

CASING RECORD

RECEIVED
STATE CORPORATION COMMISSION

JUL 16 1996

Formation	Content	From	To	Size	Put in	Pulled out
	Surface			8 5/8"	419'	0
	Production			4 1/2"	4609'	2838'

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 to 4100', 4 sks of cement. Allied mixed 300 lbs. of hulls 10 gal 50 sks of cement 10 gal 100 lbs. hulls. Replaced plug, mixed 125 sks down the casing. Maximum pressure 400 lbs., shut in pressure 50 lbs.

Name of Plugging Contractor D.S. & W. Well Servicing, Inc. License No. 6901

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

NAME OF PARTY RESPONSIBLE FOR PLUGGING FEES: Thoroughbred Associates

STATE OF Kansas COUNTY OF Barton, ss.

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 15th day of July, 19 96

Karlyn 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 C-4
Revised 05-88