

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

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

API NUMBER 15-047-21,266

LEASE NAME Wood E.

WELL NUMBER 4

1320 Ft. from S Section Line

4620 Ft. from E Section Line

SEC. 23 TWP. 26S RGE. 16 (E) or (W)

COUNTY Edwards

Date Well Completed 12-85

Plugging Commenced 02-10-94

Plugging Completed 02-24-94

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

LEASE OPERATOR Oil Producers, Inc. of Kansas

ADDRESS P.O. Box 8647, Wichita, Kansas 67208

PHONE (316) 672-6373 OPERATORS LICENSE NO. 8061

Character of Well Oil

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

The plugging proposal was approved on 02-09-94 (date)

by Duane Rankin (KCC District Agent's Name).

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

Producing Formation Kinderhook Depth to top 4422' Bottom 4437' T.D. 4500'

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 |
|-----------|---------|------|------|--------|--------|------------|
| | | 0 | 382 | 8.5/8" | 382 | 0 |
| | | 0 | 4499 | 4.1/2" | 4499 | 2308 |

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

Sand to 4360' bailed 4 sacks of cement
02-24-94 Allied pumped 300 lbs. of hulls, 10 sacks of gel, 50 sacks of cement, 10 sacks of gel,
100 lbs. of hulls, repleased plug, pumped 125 sacks of cement, max. pressure 300 lbs. shut in,
100 lbs.

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

Address P.O. Box 231, Claflin, Kansas 67525 STATE CORPORATION COMM

NAME OF PARTY RESPONSIBLE FOR PLUGGING FEES: Oil Producers, Inc. of Kansas 3-194 MAR 01 1994

STATE OF Kansas COUNTY OF Barton, ss.

CONSERVATION DIVISION
Wichita, Kansas

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 28th day of February, 19 94

Karlynn K. Beck
Notary Public

My Commission Expires: 09-21-94.

USE ONLY ONE SIDE OF EACH FORM

