

STATE OF KANSAS  
STATE CORPORATION COMMISSION  
130 S. Market, Room 2078  
Wichita, Kansas 67202

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

API NUMBER 15-075-20245 - 0000  
LEASE NAME Weede  
WELL NUMBER 1

5-7-98  
RECEIVED  
KANSAS CORP COM  
MAY -7 12:39

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

1980 Ft From N Section Line  
1980 Ft From E Section Line

Lease Operator Hugoton Energy Corporation

Sec. 5 Twp 24 S Rge 40 W

Address 301 N. Main, Suite 1900, Wichita, KS 67202

County Hamilton

Phone # (316) 262-1522 Operator License No. 3871

Date Well Completed \_\_\_\_\_

Character of Well Gas

Plugging Commenced 4/10/98

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

Plugging Completed 4/10/98

The plugging proposal was approved on 4/5/98 (date)

by Kevin Strubb (KCC District Agent's Name).

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

Producing Formation \_\_\_\_\_ Depth to Top \_\_\_\_\_ Bottom \_\_\_\_\_ T.D. 2680

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
			359	8-5/8"	359	0
			2653	4-1/2"	2653	0

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 set.

Run 2-3/8" tbg to 2160'. RU Allied Cementing. Pump 35 sx down back side & pressured up to 500#. Hooked up to tbg & pumped 65 sx. Pulled 35 jts of tbg. Pumped 50 sx w/ cement circ to surface. Pulled tbg out of hole. Topped off 4-1/2" casing w/ 10 sx. Used 65/35 poz cement w/ 6% gel.

Name of Plugging Contractor Hugoton Energy Corporation License No. 3871

Address 301 N. Main, Suite 1900, Wichita, KS 67202

Name of Party Responsible for Plugging Fees: Hugoton Energy Corporation

State of Kansas County of Sedgwick, ss.

Earl Ringeisen (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 that the same are true and correct, so help me God.

(Signature) Earl Ringeisen  
(Address) 301 N. Main, Suite 1900, Wichita, KS 67202

SUBSCRIBED AND SWORN TO before me this 30TH day of April, 19 98

Arlene Valliquette

NOTARY PUBLIC - STATE OF KANSAS  
ARLENE VALLIQUETTE  
My Appt. Exp. 7-21-99

My Commission Expires:

USE ONLY ONE SIDE EACH FORM