

15-155-01021-0001  
 TYPE OR PRINT  
 NOTICE: Fill out completely  
 and return to Cons. Div.  
 office within 30 days.

LEASE OPERATOR Rick's Exploration, Inc.

ADDRESS 5600 N. May Suite 350 Oklahoma City, OK

PHONE (405) 840-9099 OPERATORS LICENSE NO. 07873

Character of Well Oil

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

Date Well Completed         

Plugging Commenced 12-10-96

Plugging Completed 12-12-96

The plugging proposal was approved on          (date)

by          (KCC District Agent's Name).

Is ACO-1 filled?          If not, is well log attached?         

Producing Formation          Depth to Top          Bottom          T.D. 3994'

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

12-23-96

OIL, GAS OR WATER RECORDS | CASING RECORD

| Formation | Content | From | To | Size  | Put In | Pulled out |
|-----------|---------|------|----|-------|--------|------------|
|           |         |      |    | 8 5/8 | 240'   | none       |
|           |         |      |    | 5 1/2 | 3994'  | 2611'      |
|           |         |      |    |       |        |            |
|           |         |      |    |       |        |            |

Describe in detail the manner in which the well was plugged, indicating where the mud fluid placed and the method or methods used in introducing it into the hole. If cement or other plugging material was used, state the character of same and depth placed, from          feet to          feet each side.  
Ran 5 sks cement on top of CTBP at 3450'. Shot well at 2803 & 2611'. Pipe came free at 2611'.  
Pulled pipe up to 1000', mixed 35 sks cement w/100# hulls. Pulled up to 550', mixed 35 sks cement w/100# hulls. Pulled to 290', circulated cement to surface with 105 sks. Pulled rest of pipe topped with 20 sks cement. Plugging complete. 60/40 4% gel.

Name of Plugging Contractor Mike's Testing & Salvage, Inc. License No. 31529

Address P.O. Box 467 Chase, Kansas 67524

NAME OF PARTY RESPONSIBLE FOR PLUGGING FEES: Rick's Exploration, Inc.

STATE OF Kansas COUNTY OF Rice, ss.

Mike Kelso (Employee of Operator) or (Operator)

above-described well, being first duly sworn on oath, says: That I have knowledge of the facts stated, 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) *Mike Kelso*

(Address) P. O. Box 467 Chase, KS 67524

SUBSCRIBED AND SWORN TO before me this 20th day of December, 1996

*James S. [Signature]*  
 Notary Public

My Commission Expires:         

