

STATE OF KANSAS
COMMISSION
S. Market, Room 2078
Wichita, KS 67202

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

API NUMBER 15-185-23162-00-00

LEASE NAME Stafford West

WELL NUMBER 2

1155 Ft. from S Section Line

1410 Ft. from E Section Line

SEC. 15 TWP. 24 RGE. 12 (E) or (W)

COUNTY Stafford

Date Well Completed _____

Plugging Commenced 6-18-03

Plugging Completed 6-19-03

RECEIVED
1-2-03
JUL 02 2003

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

KCC WICHITA

LEASE OPERATOR RAMA OPERATING CO., INC.

ADDRESS P.O. Box 159 Stafford, Kansas 67578

PHONE# (620) 234-5191 OPERATORS LICENSE NO. 3911

Character of Well Gas

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

When plugging proposal was approved on _____ (date)

Richard Lacey (KCC District Agent's Name)

ACD-1 filed? _____ If not, is well log attached? _____

Producing Formation _____ Depth to Top _____ Bottom T.D. 3826'

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

WELL, GAS OR WATER RECORDS

CASING RECORD

Formation	Content	From	To	Size	Put in	Pulled out
					8-5/8"	269'
					5-1/2"	2640'

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 is used, state the character of same and depth placed, from _____ feet to _____ feet each side. Plugged off bottom with sand to 3500' and 5 sacks cement. Cut pipe loose @2640', pulled up to 650', pumped 10 sacks gel, 50 sacks cement and 100# bulls, pulled up to 300', pumped 50 sacks cement and 100# bulls, pulled up to 40' and circulated 30 sacks cement to surface. 60/40 pos, 6% gel.

Plugging Complete.

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: Rama Operating Co., 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 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) [Signature]

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

SUBSCRIBED AND SWORN TO before me this 30th day of June, 2003

[Signature]
Notary Public

My Commission Expires: _____

