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

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

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

API NUMBER 15-185-20940-0001

LEASE NAME DeBusk

WELL NUMBER 3

____ Ft. from S Section Line

____ Ft. from E Section Line

SEC. 19 TWP. 24 RGE. 14 (E) or (W)

COUNTY Stafford

Date Well Completed ____

Plugging Commenced 6-12-00

Plugging Completed 6-14-00

LEASE OPERATOR Condor Energy, Inc.

ADDRESS P.O. Box 108 Great Bend, Kansas 67530

PHONE# (316) 792-1340 OPERATORS LICENSE NO. 6016

Character of Well SWD

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

The plugging proposal was approved on ____ (date)

by Richard Lacey (KCC District Agent's Name).

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

Producing Formation ____ Depth to Top ____ Bottom ____ T.D. 4413'

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

RECEIVED
STATE CORPORATION COMMISSION
JUN 27 2000
CONSERVATION DIVISION
Wichita, Kansas

OIL, GAS OR WATER RECORDS				CASING RECORD		
Formation	Content	From	To	Size	Put in	Pulled out
				8-5/8"	343'	None
				5-1/2"	4413'	2000'

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 pl were used, state the character of same and depth placed, from __ feet to __ feet each s
Plugged off bottom with sand to 3720' and 5 sks. cement. Shot pipe @2600', 2400', 2200' and 2000'. Pulled casing up to 900', pumped 10sks. gel and 50sks. cement, pulled to 370', pumped 50 sks cement, pulled to 40' and circulated 10 sks. 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: Mike's Testing & Salvage, 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 fac statements, and matters herein contained and the log of the above-described well as filed t the same are true and correct, so help me God.

(Signature) ____

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

SUBSCRIBED AND SWORN TO before me this 21st. day of June, 2000

____
Notary Public

My Commission Expires: ____

IRENE HERZBERG
State of Kansas
My Appt. Exp. Aug. 24, 2001

Form C
Revised 05