

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

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

API NUMBER 15-185-11009-0000

LEASE NAME Smith

WELL NUMBER 3

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

Et. from S Section Line

Et. from E Section Line

SEC. 16 TWP. 24 RGE. 14W (E) or (W)

COUNTY Stafford

LEASE OPERATOR D. R. Lauck Oil Co., Inc.

ADDRESS 221 S. Broadway, Suite 400 Wichita, KS 67202

Date Well Completed _____

PHONE (316) 263-8267 OPERATORS LICENSE NO. 5427

Plugging Commenced 7-24-96

Character of Well Oil

Plugging Completed 8-02-96

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

The plugging proposal was approved on _____ (date)

by Steve Pfeifer (KCC District Agent's Name).

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

Producing Formation _____ Depth to Top _____ Bottom _____ T.D. 4277'

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
				8 5/8	216'	none
				5 1/2	4266'	2812'

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. Sanded off bottom to 3714' & 5 sks cement. Shot well @ 2812', worked pipe free. Pulled all casing. Plugged well with 300# hulls, 10 sks gel, 50 sks cement, 10 sks gel, 100# hulls. Release plug. Mix 125 sks cement down 8 5/8. 60/40 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: D. R. Lauck Oil Co., Inc. KANSAS CORPORATION COMMISSION

STATE OF Kansas COUNTY OF Rice, ss.

Mike Kelso

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

(Signature) Mike Kelso

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

SUBSCRIBED AND SWORN TO before me this 14th day of August, 1996

Irene Herzberg
Notary Public

My Commission Expires: _____

