

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

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

API NUMBER 15-095-21603-0000

LEASE NAME Vermillion

WELL NUMBER #1-10

3400 Ft. from S Section Line

1980- Ft. from E Section Line

SEC. 10 TWP. 28 SRGE. 10 (X) or (W)

COUNTY Kingman

Date Well Completed 3-18-89

Plugging Commenced 3-18-89

Plugging Completed 3-19-89

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

LEASE OPERATOR Shepler & Thomas, Inc.

ADDRESS P.O. Box 1162, Liberal, KS 67905-1162

PHONE#(316) 624-0750 OPERATORS LICENSE NO. 3711

Character of Well D & A

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

Did you notify the KCC/KDHE Joint District Office prior to plugging this well? Yes

Which KCC/KDHE Joint Office did you notify? Wichita

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

Producing Formation N/A Depth to Top _____ Bottom _____ T.D. 2700

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

OIL, GAS OR WATER RECORDS N/A

CASING RECORD

Formation	Content	From	To	Size	Put In	Pulled
				8 5/8	230	-0

RECEIVED
STATE CORPORATION COMMISSION
MAR 23 1989
CONSERVATION DIVISION
Wichita, Kansas

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.

Plugged with 60/40 poz, 6% gel as follows: Mud from 2700 to 1650, 35 sx from 1650 to 1550, mud to 1000, 35 sx from 1000 to 900, mud to 275, 35 sx from 275 to 175, mud to 60', 25 sx from 60' to 0, 10 sx in rathole, cut off and cap 3' below G.L.

(If additional description is necessary, use BACK of this form.)

Name of Plugging Contractor BJ-Titan License No. _____

Address Medecine Lodge, KS

STATE OF KANSAS COUNTY OF SEWARD, ss.

R. F. Burke

(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) R. F. Burke

R. F. BURKE

(Address) P.O. Box 1162, Liberal, KS

SUBSCRIBED AND SWORN TO before me this 21st day of March, 19 89

Jody Phelps

JODY PHELPS Notary Public

My Commission Expires: January-28, 1991

