

STATE CORPORATION COMMISSION
200 Colorado Darby Building
Wichita, Kansas 67202

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

API NUMBER 15-185-23,001-0000

LEASE NAME Thompson

WELL NUMBER 1

4620 Ft. from S Section Line

1980 Ft. from E Section Line

SEC. 35 TWP. 24 RGE. 11 (E) or (W)

COUNTY Stafford

Date Well Completed N/A

Plugging Commenced 11-02-96

Plugging Completed 11-02-96

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

LEASE OPERATOR Oil Producers, Inc. of Kansas

ADDRESS P.O. Box 8647, Wichita, Kansas 67208

PHONE (316) 681-0231 OPERATORS LICENSE NO. 8061

Character of Well oil

(Oil, Gas, OAA, SWD, Input, Water Supply Well)

The plugging proposal was approved on 11-02-96 (date)

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

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

Producing Formation N/A Depth to top 3716 Bottom 3745 T.C. 3829

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

11-14-96

OIL, GAS OR WATER RECORDS

CASING RECORD

Formation	Content	From	To	Size	Put in	Pulled out
	Surface			8 5/8"	262	0
	Production			4 1/2"	3828	2896

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 plug were used, state the character of same and depth placed, from _____ feet to _____ feet each set. Bottom plug; sanded off to 3660' 4 sks of cement. Allied mixed 300 lbs. of hulls 10 gal 50 sks of cement. Mixed 100 lbs. of hulls. Released the plug. Mixed 125 sks down the surface pipe. Max. pressure 500 lbs. Shut in pressure 100 lbs.

Name of Plugging Contractor D.S.& W. Well Servicing, Inc. License No. 6901

Address P.O. Box 231, Claflin, Kansas 67525

NAME OF PARTY RESPONSIBLE FOR PLUGGING FEES: Oil Producers, Inc. of Kansas

STATE OF Kansas COUNTY OF Barton, ss.

Joseph F. Strube (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 the the same are true and correct, so help me God.

(Signature) Joseph F. Strube

(Address) P.O. Box 231, Claflin, Kansas 67525

SUBSCRIBED AND SWORN TO before me this 11th day of November, 19 96

Karlynn K. Beck
Notary Public

My Commission Expires: 09-28-98.

USE ONLY ONE SIDE OF EACH FORM



Form CP-4
Revised 05-88