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

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

API NUMBER 15-155-20190-0000

LEASE NAME England

WELL NUMBER 1

_____ Ft. from S Section Line

_____ Ft. from E Section Line

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

LEASE OPERATOR Excalibur Production Co. Inc.

SEC. 34 TWP. 23 RGE. 4W ~~(E)~~ or (W)

ADDRESS P.O. Box 278 McPherson, Ks. 67460

COUNTY Reno

PHONE # (316) 241-1265 OPERATORS LICENSE NO. 5330

Date Well Completed 1-22-72

Character of Well Oil

Plugging Commenced 2-18-92

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

Plugging Completed 2-20-92

The plugging proposal was approved on _____ (date)

by _____ (KCC District Agent's Name).

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

Producing Formation _____ Depth to Top _____ Bottom _____ T.D. 3605'

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"	252'	none
				5 1/2"	3602'	2522'

2-27-92

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 bottom to 3267' ran 5 sacks cement. Shot pipe @2522'. Spotted 35 sacks @700' came up to 300' circulated, pulled rest of pipe topped off.

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

Name of Plugging Contractor KELSO CASING PULLING, INC. License No. 6050

Address P.O. Box 347 Chase, Kansas 67524

NAME OF PARTY RESPONSIBLE FOR PLUGGING FEES: Excalibur Production Co. Inc.

STATE OF Kansas COUNTY OF Rice, ss.

R. Darrell 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 as filed that the same are true and correct, so help me God.

(Signature) [signature]

(Address) P.O. Box 347 Chase, KS. 67524

SUBSCRIBED AND SWORN TO before me this 25 day of February, 19 92

[signature] Notary Public

My Commission Expires: [illegible] 24, 1993

Form CP-4
Revised 05-88