

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

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

API NUMBER 15-069-20,182-0000

LEASE NAME Brown-F.G.

WELL NUMBER #1

SPOT LOCATION C NW SE

SEC.9 TWP.24S RGE.30W (EXXXW)

COUNTY Gray

Date Well Completed 1-14-84

Plugging Commenced 1-14-84

Plugging Completed 1-14-84

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

LEASE OPERATOR Mustang Drilling & Exploration, Inc.

ADDRESS P.O. Box 1609
Great Bend, KS 67530

PHONE # (316) 792-7323 OPERATORS LICENSE NO. 5652

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? Dodge City

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

Producing formation _____ Depth to top _____ bottom _____ T.D. 5085'

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"	466'	none

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.

1st plug @ 1900' w/ 50 sx, 2nd plug @ 960' w/ 50 sx, 3rd plug @ 510' w/ 50 sx,
4th plug @ 40' w/ 10 sx, 15 sx rathole: 175 sx 60/40 poz, 3% cc, 2% gel,
plug down @ 8:15 a.m. 1-14-84

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

Name of Plugging Contractor Mustang Drilling & Exploration, Inc. License No. 5652
Address P.O. Box 1609, Great Bend, Kansas 67530

STATE OF Kansas COUNTY OF Barton, ss.

Bill Nelson

(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 above-described well as filed that the same are true and
correct to the best of my knowledge and belief, I do hereby certify under the hand
and seal of the State Corporation Commission and the State of Kansas, this _____ day
of _____, 1984.

STATE CORPORATION COMMISSION

(Signature) Bill Nelson
Bill Nelson

(Address) P.O. Box 1609, Great Bend, KS

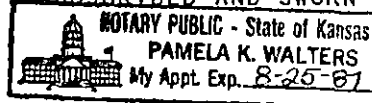
FEB 15 1984

CONSERVATION DIVISION
Wichita, Kansas

My Commission expires:

August 25, 1987

SUBSCRIBED AND SWORN TO before me this 6th day of February, 1984



Pamela K. Walters
Pamela K. Walters
Notary Public