

STATE OF KANSAS
OIL & GAS COMMISSION
301 S. Market, Room 2078
Wichita, KS 67202

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

15-009-15188-00-00
API NUMBER Comp. 4-12-43

RECEIVED
NOV 15 2001
11-15-01
KCC WICHITA

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

LEASE NAME Hoffman JB

WELL NUMBER 2

630 Ft. from S Section Line

525 Ft. from E Section Line

SEC. 19 TWP. 16 RGE. 11W (E) or (W)

COUNTY Barton

Date Well Completed

Plugging Commenced 11-7-01

Plugging Completed 11-8-01

LEASE OPERATOR ROBINOWITZ OIL COMPANY

ADDRESS 7130 S. Lewis, Suite 910, Tulsa, OK. 74136-5495

PHONE (918) 481-7130 OPERATORS LICENSE NO. 6883

Character of Well Oil

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

Is plugging proposal was approved on _____ (date)

Patrick Staab (KCC District Agent's Name).

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

Producing Formation _____ Depth to Top _____ Bottom _____ T.D. 3377'

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
				5-1/2"	3369'	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 plugging material is used, state the character of same and depth placed, from _____ feet to _____ feet each side.
Plugged off bottom with sand to 3300' and 5 sks. cement. Perforated well @1475', 785' & 300'. Ran 2-3/8" tubing to 1800', pumped 20 sks. gel, pulled up to 1500', pumped 75 sks. cement and 300# hulls, pulled up to 785', pumped 65 sks. cement and 500# hulls, pulled up to 400', pumped 65 sks cement and 200# hulls, topped off with 50 sks. cement, filled up backside with 165 sks. cement. 60/40 pos, 10% 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: _____

State of Kansas COUNTY OF Rice, ss.

Mike Kelso (Employee of Operator) or (Operator) above-described well, being first duly sworn on oath, says: That I have knowledge of the facts and matters herein contained and the log of the above-described well as filed to the same are true and correct, so help me God.

(Signature) *Mike Kelso*

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

SUBSCRIBED AND SWORN TO before me this 12th day of November XX9 2001

Irene Herzberg
Notary Public

My Commission Expires: _____

