

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

LEASE NAME A.A. Redetzke
 WELL NUMBER 3
4620 Ft. from S Section Line
1980 Ft. from E Section Line
 SEC. 19 TWP. 16S RGE. 11 (E) or (W)
 COUNTY Barton
 Date Well Completed 10-08-43
 Plugging Commenced 02-28-97
 Plugging Completed 02-28-97

LEASE OPERATOR John J. Darrah, Jr.
 ADDRESS 225 North Market, Suite 300, Wichita, Kansas 67202
 PHONE (316) 263-2243 OPERATORS LICENSE NO. 5088

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

The plugging proposal was approved on 02-28-97 (date)
 by District 4, Hays, Bruce Basye (KCC District Agent's Name).

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

Producing Formation Lansing-K.C. Depth to Top 3140 Bottom 3238 r.n. 3364

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

OIL, GAS OR WATER RECORDS | CASING RECORD 3-5-97

Formation	Content	From	To	Size	Put In	Pulled out
	Surface			8 5/8"	322	0
	Production			5 1/2"	3354	0

Describe in detail the manner in which the well was plugged, indicating where the plug fluid was placed and the method or methods used in introducing it into the hole. If cement or other plug was used, state the character of same and depth placed, - from feet to _____ each set
Bottom plug sanded off to 3090' 5 sks of cement. Rigged up Log Tech of Kansas, they perforated 1475', 800', and 450'. Ran tubing to bottom. Pumped bottom plug 15 sks gel, 50 sks cement and 300 hulls. Pulled tubing to 1475', pumped 125 sks cement and 300 lbs. of hulls and circulated. Pulled tubing out and topped off with 20 sks of cement. Tied on to 8 5/8", pumped 35 sks cement, pressured up to 400 psi.

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: John Jay Darrah, Jr.

STATE OF Kansas COUNTY OF Barton, ss.

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

SUBSCRIBED AND SWORN TO before me this 3rd day of March, 19 97

Karlynn K. Beck
 Notary Public

My Commission Expires: 09-28-98

USE ONLY ONE SIDE OF EACH FORM

KARLYNN K. BECK
 Notary Public - State of Kansas
 My Appt. Expires 9-28-98