

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

LEASE OPERATOR Eason Drilling Services

ADDRESS 2 West Second St. -Tulsa, Ok. 74103

PHONE#(918) 583-1791 OPERATORS LICENSE NO. 30151

Character of Well Oil

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

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. 3369'

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

4-2-96

OIL, GAS OR WATER RECORDS

CASING RECORD

Formation	Content	From	To	Size	Put in	Pulled out
				8 5/8"	195'	none
				5 1/2"	3360'	none

KANSAS RECORDS DEPARTMENT

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 pl. were used, state the character of same and depth placed, from _____ feet to _____ feet, each set. Set bridge plug at 2900'. Perforated well at 1475'. Ran 1500' of 2-3/8" tubing in. Pumped 110 sacks cement 60/40 POZMIX 10% gel. cement circulated to surface. Pulled tubing out of hole. Tied on to 5-1/2" long string, pumped 25 sacks cement. (60/40 POZMIX 10% gel). Tied on to 8-5/8" surface. Well pressured up. Backside was squeezed. Plugging complete.

Name of Plugging Contractor Mike's Testing & Salvage, Inc. License No. 31529

Address P.O. Box 209 Chase, Kansas 67524

NAME OF PARTY RESPONSIBLE FOR PLUGGING FEES: Eason Drilling Services - Tulsa, Ok. 74103

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 fact statements, 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) [Signature]

(Address) P.O. Box 209 Chase, Kansas 67524

SUBSCRIBED AND SWORN TO before me this 1st day of April, 19 96

[Signature]
 Notary Public

My Commission Expires: _____

