

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

LEASE OPERATOR Lebsack Oil Production, Inc.

ADDRESS P.O. Box 489, Hays, Ks. 67601

PHONE(S) (913) 625-5444 OPERATORS LICENSE NO. 5210

Character of Well D & A

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

The plugging proposal was approved on 01-18-95 (date)

by Steve Middleton, Dodge City (XCC District Agent's Name).

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

Producing Formation _____ Depth to Top _____ Bottom _____ T.O. _____

How 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
Surface				8 5/8"		

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 plug were used, state the character of same and depth placed, from feet to feet each set. Fill w/heavy mud; 1 plug from 3500'-3100' w/100 sks., 2nd plug from 2005'-1805' with 50 sks., 3rd plug from 1100'-780' with 80 sks., 4th plug from 600'-440' with 40 sks., 5th plug from 290'-90' with 50 sks., 6th plug from 40'-0' with 10 sks., 60/40 pos, 6% gel, with # floseal per sk., rat hole 15 sks, total 345 sks.

Name of Plugging Contractor Abercrombie RTD, Inc. License No. 30684

Address 150 N. Main, Suite 801, Wichita, Ks. 67202

Name of Party Responsible for Plugging Fees: Lebsack Oil Production, Inc.

State of Kansas County of Sedgwick, ss.

Jack K. Wharton (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 and the same are true and correct, so help me God.

FEB 16 1995
 2-16-95

(Signature) Jack K. Wharton
 (Address) 150 N. Main, Ste 801, Wichita, Ks. 67202

SUBSCRIBED AND SWORN before me this _____ day of _____, 19 _____

Notary Public

USE ONLY ONE SIDE OF EACH FORM