

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

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

API NUMBER 15-185-22,545-0000

LEASE NAME Teichman

WELL NUMBER C-1

- Ft. from S Section Line

- Ft. from E Section Line

SEC. 20 TWP. 22 RGE. 12 ~~XXX~~ or (W)

COUNTY Stafford

Date Well Completed 1988

Plugging Commenced 3-31-92

Plugging Completed 10:00 AM

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

LEASE OPERATOR Voigt Oil & Gas Co Inc.

ADDRESS Rt 3 Box 33B, McPherson, Kansas 67460

PHONE # 013)227-3241 OPERATORS LICENSE NO. 5057

Character of Well Oil

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

The plugging proposal was approved on 3-31-92 (date)

by Duane Rankin (KCC District Agent's Name).

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

Producing Formation KC Depth to Top 3474 Bottom 3482 T.D. 3807

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	694	0
				5 1/2	3801	2342

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 section.  
 Bottom plug: Sand to 3420 & bailed 5 sx cement.

Top plug: Pump 300 lbs H, 8 sx gel, 50 sx cement, 7 sx gel, 100 lb Huls, 8 5/8 Wiper plug, & 100 sx cement (60/40 6%) Max pressure 800 & shut in 350 lbs.

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

Name of Plugging Contractor Great Bend Casing Pullers, Inc. License No. 4635 CP

Address Box 251, Great Bend, Kansas 67530

APR 0 1 1992 4-1-92

NAME OF PARTY RESPONSIBLE FOR PLUGGING FEES: Voigt Oil & Gas Co., Inc.

STATE CORPORATION COMMISSION  
 CONSERVATION DIVISION  
 Wichita, Kansas  
 ss.

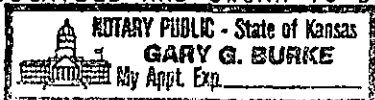
STATE OF Kansas COUNTY OF Barton

Anna K. Burke (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 same are true and correct, so help me God.

(Signature) Anna K. Burke

(Address) Box 251, Great Bend, Kansas 67530

SUBSCRIBED AND SWORN TO before me this 31 day of March, 19 92



My Commission Expires: 4-30-93

Gary G. Burke  
 Notary Public