

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

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

API NUMBER 15-083-21333-0000

LEASE NAME Selfridge

WELL NUMBER A-1

         Ft. from S Section Line

         Ft. from E Section Line

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

LEASE OPERATOR Castle-Rock Production, Inc.

SEC. 27 TWP. 22 RGE. 22W (E) or (W)

ADDRESS 107 N. Market Suite #1100 Wichita, KS 67202 COUNTY Hodgeman

PHONE# (316) 687-9414 OPERATORS LICENSE NO. 3773 Date Well Completed         

Character of Well Oil Plugging Commenced 9-6-90

(Oil, Gas, D&A, SWD, Input, Water Supply Well) Plugging Completed 9-12-90

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. 4500'

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"	512'	none
				4 1/2"	4499'	1314'

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 set.  
Sanded bottom to 4380' dumped 4 sacks cement. Shot pipe @2604',  
2405'. Mixed 13 sacks gel and 50 cement and displaced w/gel to  
1080' circulated mud then circulated cement to 465'.

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

Name of Plugging Contractor KELSO CASING PULLING, INC. License No. 6050

Address P.O. Box 347 Chase, Kansas 67524 9-21-90

NAME OF PARTY RESPONSIBLE FOR PLUGGING FEES: Castle-Rock Production, Inc.

STATE OF Kansas COUNTY OF Rice, ss.

R. Darrell Kelso (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, that the same are true and correct, so help me God.

(Signature) [Signature]

(Address) P.O. Box 347 Chase, KS. 67524

SUBSCRIBED AND SWORN TO before me this 20 day of Sept., 1990

[Signature]  
Notary Public

My Commission Expires:         

