

STATE CORPORATION COMMISSION
200 Colorado Derby Building
Wichita, Kansas 67202

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

API NUMBER 15-185-22114-0000

LEASE NAME Alpers

WELL NUMBER 5

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

1320 Ft. from S Section Line

2310 Ft. from E Section Line

SEC. 22 TWP. 22 RGE. 12 (E) or (W)

COUNTY Stafford

LEASE OPERATOR L.D. Drilling, Inc.

ADDRESS R.R. 1, Box 183B, Great Bend, Kansas 67530

PHONE (316) 793-3051 OPERATORS LICENSE No. 6039

Date Well Completed _____

Character of Well oil

Plugging Commenced 02-20-96

(oil, gas, O&A, SWD, Input, Water Supply Well)

Plugging Completed 02-21-96

The plugging proposal was approved on 02-20-96

(date)

by Steve Middleton 2-23-96

(KCC District Agent's Name)

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

Producing formation Arbuckle Depth to top 3469' Bottom 3513' T.C. 3770'

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
	Surface			8 5/8"	294'	0
	Production			4 1/2"	3769'	2220'

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 was used, state the character of same and depth placed, - from feet to feet each set. Bottom plug; sanded off to 3400', 4 sks of cement. Mixed 300 lbs. of hulls, 10 sks of gel, 50 sks cement, 10 sks gel, 100 lbs. of hulls, plug, 125 sks of cement. Maximum pressure 750, shut in pressure 50 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: L.D. Drilling, Inc.

STATE OF Kansas COUNTY OF Barton, ss.

Joseph F. 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 F. Strube

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

SUBSCRIBED AND SWORN TO before me this 22nd day of February, 19 96

Karlynn K. Beck
Notary Public

My Commission Expires: 9-28-98

USE ONLY ONE SIDE OF EACH FORM



Form CP-1
Revised 05-88