

API NUMBER 15-145-21227-0000

LEASE NAME Bauer

WELL NUMBER 2-27

 Ft. from S Section Line

 Ft. from E Section Line

SEC. 27 TWP. 21S RGE. 15W (E) or (W)

COUNTY Pawnee

Date Well Completed

Plugging Commenced 10-20-93

Plugging Completed 10-22-93

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

LEASE OPERATOR Globe Exploration, Inc.

ADDRESS P. O. Box 12, Great Bend, KS 67530

PHONE# (316) 792-7607 OPERATORS LICENSE NO. 6170

Character of Well Oil

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

The plugging proposal was approved on (date)

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

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

Producing Formation Depth to Top Bottom T.D. 3975'

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	683'	none.
				5 1/2	3954'	2800'

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 @ 3900' & 5 sks cement. Shot @ 3000' & 2800'. Pulled pipe. Plugged well with 300# hulls, 10 sks gel, 50 sks cement, 10 sks gel, 100# hulls, 150 sks cement. Max PSI 550#. 60/40 pos 6% gel. Plugging complete.

(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, KS 67524 11-10-93

NAME OF PARTY RESPONSIBLE FOR PLUGGING FEES: Globe Exploration, Inc.

STATE OF KANSAS COUNTY OF RICE, ss.

R. DARRELL 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 filed at the same are true and correct, so help me God.

(Signature) R. Darrell Kelso

(Address) P. O. BOX 347 CHASE, KS 67524

SUBSCRIBED AND SWORN TO before me this 9th day of November, 19 93

Irene Herzberg
 Notary Public

My Commission Expires:

