

STATE OF KANSAS
STATE CORPORATION COMMISSION
1 S. Market, Room 2078
Wichita, KS 67202

WELL PLUGGING RECORD
K.A.R.--02-3-117

API NUMBER 15-185-01820-00-00

LEASE NAME Applegate

WELL NUMBER 6

1650 Ft. from ^N Section Line

990 Ft. from E Section Line

SEC. 35 TWP. 21S RGE. 13W (E) or (W)

COUNTY Stafford

Date Well Completed 4-13-56

Plugging Commenced 5-20-02

Plugging Completed 5-20-02

RECEIVED

MAY 23 2002

5-23-02

KCC WICHITA

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

LEASE OPERATOR Globe Operating, Inc.

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

PHONE # (620) 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)

Richard Lacey (KCC District Agent's Name).

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

Producing Formation _____ Depth to Top _____ Bottom _____ T.D. 3748'

Give low 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"	291'	None
				5-1/2"	3744'	None

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 are used, state the character of same and depth placed, from _____ feet to _____ feet each side.
Perforated 3" tubing and 5-1/2" casing @700'. Hooked onto 3" tubing and circulated 125 sacks 60/40 pos, 6% gel up the 5-1/2" long-string. Pressured up on 5-1/2" to 600#. Backside was Squeezed.

Plugging Complete.

Name of Plugging Contractor Mike's Testing & Salvage, Inc. License No. 31529

Address P.O. Box 467 Chase, Kansas 67524

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

STATE OF Kansas COUNTY OF Rice, ss.

Mike Kelso (Employee of Operator) or (Operator)
above-described well, being first duly sworn on oath, says: That I have knowledge of the facts and statements, and matters herein contained and the log of the above-described well as filed to the same are true and correct, so help me God.

(Signature) [Signature]

(Address) P. O. Box 467 Chase, KS 67524

SUBSCRIBED AND SWORN TO before me this 22nd. day of May ~~XX~~ 2002

[Signature]
Notary Public

My Commission Expires:

NOTARY PUBLIC - State of Kansas
IRENE HERZBERG
My Appt. Exp. 8-24-05

OR