

STATE CORPORATION COMMISSION
200 Colorado Darby Building
Wichita, Kansas 67202

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

API NUMBER 15-097-20217-0000

LEASE NAME Cook A

WELL NUMBER 1

3630 Ft. from S Section Line

4620 Ft. from E Section Line

SEC. 34 TWP. 28 RGE. 18 (E) or (W)

COUNTY Kiowa

Date Well Completed 08-19-96

Plugging Commenced 08-16-96

Plugging Completed 08-19-96

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

LEASE OPERATOR Siroky Oil Management

ADDRESS P.O. Box 464, Pratt, Kansas 67124

PHONE (316) 672-5713 OPERATORS LICENSE No. 3959

Character of Well gas

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

The plugging proposal was approved on 08-16-96 (date)

by Steve Pfeifer (KCC District Agent's Name)

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

Producing Formation Depth to top 3588 Bottom 3596 T.C. 3763

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"	420	0
	Production			4 1/2"	3763	2312'

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 were used, state the character of same and depth placed, - from feet to feet each set. Bottom plug; sanded off to 3530' 4 sks of cement. Allied mixed 300 lbs. of CS hulls 10 gal 50 sks of cement. 60/40 poz 6% 10% Gel. Plug, mixed 150 sks of cement 60/40 poz 6% gel. Maximum pressure 1200 lbs. minimum pressure 200 lbs.

Name of Plugging Contractor D.S. & W. Well Servicing, Inc. License No. 6901

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

RECEIVED
KANSAS CORPORATION COMMISSION

NAME OF PARTY RESPONSIBLE FOR PLUGGING FEES: Siroky Management

STATE OF Kansas COUNTY OF Barton, ss. AUG 22 1996
8-22-96

Joseph F. Strube (Employee of Operator) or (Operator) of above-described well, being first duly sworn on oath, says: that I have known 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 20th day of August, 19 96

Karlynn K. Beck
Notary Public

My Commission Expires: 09-28-98

USE ONLY ONE SIDE OF EACH FORM

KARLYNN K. BECK
NOTARY PUBLIC
STATE OF KANSAS
MY APPT. EXPIRES 9-28-98

Form CP-4
Revised 05-88