

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

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

API NUMBER 15-185-21,807 -00-00

LEASE NAME Mellies

WELL NUMBER 4

FEB 05 2003 NOTICE: Fill out completely
and return to Cons. Div.
office within 30 days.

KCC WICHITA

330 Ft. from S Section Line

1320 Ft. from E Section Line

SEC. 36 TWP. 21 RGE. 12W (E) or (W)

COUNTY Stafford

LEASE OPERATOR Globe Operating, Inc.

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

PHONE# (620) 792-7607 OPERATORS LICENSE NO. 6170

Date Well Completed

Character of Well Oil

Plugging Commenced 1-28-03

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

Plugging Completed 1-30-03

The plugging proposal was approved on _____ (date)

by Richard Lacey (KCC District Agent's Name)

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

Producing Formation _____ Depth to Top _____ Bottom T.D. 3752

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"	261'	None
				4-1/2"	3562'	1261'

Describe in detail the manner in which the well was plugged, indicating where the mud fluid placed and the method or methods used in introducing it into the hole. If cement or other pl were used, state the character of same and depth placed, from feet to feet each s
Plugged off bottom with sand to 3470' and 4 sacks cement. Shot pipe @2400', pipe parted @1261'. Layed down 35 its. of 4-1/2". Pumped 200# hulls, 10 sacks gel, 50 sacks cement, 10 sacks gel, 100# hulls, 8-5/8" plug and 100 sacks cement, 60/40 pos, 6% gel.
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 fact statements, and matters herein contained and the log of the above-described well as filed t the same are true and correct, so help me God.

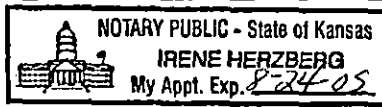
(Signature) *Mike Kelso*

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

SUBSCRIBED AND SWORN TO before me this 3rd. day of February, 20. 03

Irene Herzberg
Notary Public

My Commission Expires:



Form 07 Revised 05-