THE CHUBBING REWALL ALE OF KANSAS API NUMBER 15-159-21811-0000 K.A.R.-82-3-117 TATE CORPORATION COMMISSION 0 S. Market, Room 2078 LEASE NAME Pallister ichita, v KS 67202 WELL NUMBER 1-12L TYPE OR PRINT NOTICE: Fill out completely and return to Cons. Div. Ft. from S Section Line office within 30 days. Ft. from E Section Line SEC._ 12 TWP. 21 RGE. 7 XXXor(W) EASE OPERATOR Quality Well_Service. Inc. JORESS 249 Beth Drive Sterling, Ks. 67579-9048 COUNTY Rice tone#(316) 727-3410 OPERATORS LICENSE NO. 31925 . Date Well Completed 4-1-84 paracter of Well Oil Plugging Commenced 11-2-98 Plugging Completed 11-4-98)[]. Gas. D&A. SWD, Input, Water Supply Well) ______(date) _____(KCC District Agent's Name). , David P. Williams s ACO-I filed? _____If not, is well log attached?____ oducing Formation Miss. Depth to Top 3462 Bottom 3478 T.D. low depth and thickness of all water, oil and gas formations. CASING RECORD ILL GAS OR WATER RECORDS From To Size Put in Pulled out ormation. Content -200**"** 3495 iscribe in detail the manner in which the well was plugged, indicating where the mud fluid wa aced and the method or methods used in introducing it into the hole. If cement or other plug ire used, state the character of same and depth placed, from__feet to___feet each set Sanded to '. Bailed 5 sks cement. Shot 2400'. Pulled to 1050'. Pumped 35 sks cement. Pulled to 600'. Pumped 35 sks. Pulled to 270'. Circulated 75 sks to surface. Pulled the rest of the Dipe. Hole stayed full me of Plugging Contractor Quality Well Service, Inc. License No. 31925 dress 249 Beth Drive Sterling, Ks. 67579-9048 ME OF PARTY RESPONSIBLE FOR PLUGGING FEES: Quality Well Service, Inc. _____ COUNTY OF ___Rice___ ATE OF Kansas <u>David W Brady</u> (Employee of Operator) or (Operator) love-described well, being first duly sworn on cath, says: That I have knowledge of the facts atements, and matters herein contained and the log of the above-described well as filed tha te same are true and correct, so help me God. (Signature) (David Brach (Address) 501 ASh Chase K5 47524 SUBSCRIBED AND SWORN TO before me this 10th day of November ,1998 Sharon Mc) steve.

SHAHON MCINTYHE
State of Kansas
My Appl. Exp. Y - 2001

My Commission Expires:

Notary Public