

STATE OF KANSAS
STATE CORPORATION COMMISSION
200 Colorado Derby Building
Wichita, Kansas 67202

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

15.113.20975.0000

API NUMBER 15-113-20-944

LEASE NAME Southwestern Cullage

WELL NUMBER A-1

 Ft. from S Section Line

 Ft. from E Section Line

SEC. 2 TWP. 20S RGE. 4 (E) or (W)

COUNTY McPherson

Date Well Completed 1-22-82

Plugging Commenced 10-21-86

Plugging Completed 8-4-87

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

LEASE OPERATOR PTT

ADDRESS 3535 Broadway, Suite C, Kansas City, Mo 64111

PHONE# (816) 753-1010 OPERATORS LICENSE NO. 8653

Character of Well D&A

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

Did you notify the KCC District Office prior to plugging this well? yes

Which KCC Office did you notify? Salina

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

Producing Formation Depth to Top Bottom T.D.

Show depth and thickness of all water, oil and gas formations. Spot Location

80-E-Se-Sw-Sw

OIL, GAS OR WATER RECORDS

CASING RECORD

Formation	Content	From	To	Size	Put In	Pulled out
				13 3/8	48	225sx none
				8 5/8	705	none
				5 1/2	3885	2600

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.
Sand from 3885 to 3660, 5sx cement Dumped bailer 3660 to 3630

4sx mud 75sx cement 12 sx mud 11sx cement
1"-13 3/8 pump 14sx cement

Elmo and Unrah on Location

(If additional description is necessary, use BACK of this form.)

Name of Plugging Contractor Clarke Corporation License No. 5105

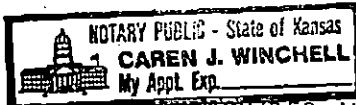
Address Box 187 Medicine Lodge Kansas 67104

STATE OF Kansas COUNTY OF Barber, ss.

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

(Signature) Elmo Marcanstern

(Address) Med Lodge KS



SUBSCRIBED AND SWORN TO before me this 17 day of August, 19 87

My Commission Expires: June 31, 1991

RECEIVED
Notary Public
STATE CORPORATION COMMISSION

8-18-87
AUG 18 1987 Form CP-4
Revised 07-86

CONSERVATION DIVISION
Wichita, Kansas