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

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

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

API NUMBER 15-009-23,129-0000
LEASE NAME Spece
WELL NUMBER 1
_____ Ft. from S Section Line
_____ Ft. from E Section Line
SEC. 24 TWP. 20S RGE. 12 (E) (W)
COUNTY Barton
Date Well Completed _____
Plugging Commenced 5-8-96
Plugging Completed 5-9-96

LEASE OPERATOR Globe Operating, Inc.
ADDRESS P.O. Box 12 Great Bend, Ks. 67530
PHONE (316) 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)
by _____ (KCC District Agent's Name).
Is ACO-1 filed? _____ If not, is well log attached? _____
Producing Formation _____ Depth to Top _____ Bottom _____ T.D. 3426'

RECEIVED
KANSAS CORPORATION COMMISSION
5-15-1996
MAY 15 1996
CONSERVATION DIVISION
WICHITA, KS

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"	250'	none
				5 1/2"	3424'	2531'

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.
Plugged off bottom with sand to 3061' and 5 sacks cement. Shot casing at 2530', pulled casing up to 1400' pumped 100 sacks cement with 300# hulls, pulled up to 600' pumped 40 sacks cement with 200# hulls, pulled to 250' circulated to surface with 65 sacks cement. Pulled casing and topped off with 25 sacks cement.

Name of Plugging Contractor Mike's Testing & Salvage, Inc. License No. 31529
Address P.O. Box 209 Chase, Kansas 67524
NAME OF PARTY RESPONSIBLE FOR PLUGGING FEES: Globe Operating, Inc. - Great Bend, Ks.

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, 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) [signature]
(Address) P.O. Box 209 Chase, Kansas 67524

SUBSCRIBED AND SWORN TO before me this 14th day of May, 19 96

[signature]
Notary Public

My Commission Expires: _____

IRENE WERZBERG
State of Kansas
My Appt. Exp. Aug. 24, 1997

Form CP
Revised 05-