

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

WELL PLUGGING RECORD
K.A.R.-02-3-117

15-009-04958-00-00
API NUMBER Comp. 10-10-58

LEASE NAME Ida Brown

WELL NUMBER 1

_____ Ft. from S Section Line

_____ Ft. from E Section Line

SEC. 28 TWP. 20 RGE. 12W (E10r) W

COUNTY Barton

Date Well Completed 10-10-58

Plugging Commenced 9-25-02

Plugging Completed 9-26-02

RECEIVED
OCT 09 2008
KCC WICHITA

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

LEASE OPERATOR ZENITH DRILLING CORPORATION

ADDRESS P.O. Box 780428 Wichita, Kansas 67278-0428

PHONE (316) 684-9777 OPERATORS LICENSE NO. 5141

Character of Well Oil

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

The plugging proposal was approved on _____ (date)

by Jay Pfeifer (KCC District Agent's Name).

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

Producing Formation _____ Depth to Top _____ Bottom _____ T.D. 3460'

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"	278'	None
				5-1/2"	3453'	300'

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 section. Plugged off bottom with sand to 3380' and 5 sacks cement. Pipe parted @300'. Ran tubing to 620', pumped 220 sacks 220 sacks pf 60/40 pos, 10% gel w/500# hulls and circulated cement to surface. Pulled out tubing.

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: Zenith Drilling Corporation

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 and statements, and matters herein contained and the log of the above-described well as filed to 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 7th day of October, 2002

My Commission Expires:



Notary Public

Form CP
Revised 05-

OK