API NUMBER 15-153-20,752-00-00 WELL PLUGGING RECORD STATE OF KANSAS STATE CORPORATION COMMISSION K.A.R.-82-3-117 200 Colorado Derby Building LEASE NAME___Reeh Wichita, Kansas 67202 WELL NUMBER #1 TYPE OR PRINT NOTICE: Fill out completely 34620 Ft. from S Section Line and return to Cons. Div. office within 30 days. _4620 Ft. from E Section Line SEC. 33 TWP. LS RGE. 35 (X) or (W) LEASE OPERATOR Frontier Oil Company 125 North Market, Suite 1720 COUNTY Rawlins ADDRESS Wichita, KS 67202 Date Well Completed 6-18-90PHONE#(316) 263-1201 OPERATORS LICENSE NO. 5140 Plugging Commenced 8-31-95 Character of Well Oil (Oil, Gas, D&A, SWD, Input, Water Supply Well) Plugging Completed 8-31-95 The plugging proposal was approved on 8-31-95by _____ (KCC District Agent's Name). Is ACO-1 filed? Yes ____If not, is well log attached?_____ Producing Formation <u>Lansing-KC</u> Depth to Top______ Bottom____T.D. 4445' Show depth and thickness of all water, oil and gas formations. CASING RECORD OIL, GAS OR WATER RECORDS Size Put in Pulled out From To Content Formation 308**'** 8 5/8" -0-4 1/2" 4417' 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. Set a drillable $4\frac{1}{2}$ " cast iron plug at 4090' & pumped 4 sx com. cem. on top of plug. Shot off 4½" csq. at 2347' & pumped 105 sx 60-40 poz, 10% gel & 200# hulls down 4½" csg. Pulled 4½' csg. up to 400' from surface & pumped 125 sx 60-40 poz, 10% gel, down 4½" csg. Cem. did circ. Pulled 4½" csg. out of hole & Loaded hole w/ (If additional description is necessary, use BACK of this form.) 15 sx 60-40 poz, 10% gel cement. STATE CORPORATION COMMISSION Name of Plugging Contractor Express Well Service Address_____P. O. Box 426, Victoria, KS 67671 NAME OF PARTY RESPONSIBLE FOR PLUGGING FEES: Frontier Oil Company 0 71995 9-7-95 COUNTY OF SEDGWICK STATE OF KANSAS (Employee of Operator) or (Operator) of above-described well, being first duly sworn on oath, says: That I have knowledge of the facts, Jean Angle 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) Jean Ungle

(Address)

JEAN HOLLAR

Notary Public - State of Kansas

My Commission Expires: 5-5-98

My Appt. Expires May 5, 1998

SUBSCRIBED AND SWORN TO before me this 6th day of September ,1995

Notary Public

Form CP-4

125 North Market, Suite 1720

Wichita, KS 67202