

STATE OF KANSAS  
PETROLEUM CORPORATION COMMISSION  
501 West Market, Room 2078  
Topeka, KS 67202

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

15-183-20015-00-00  
API NUMBER

LEASE NAME RUST # 1

WELL NUMBER RUST # 1

\_\_\_\_\_ Ft. from S Section Line

\_\_\_\_\_ Ft. from E Section Line

SEC. 5 TWP. 2 RGE. 14 (E) or (W)

COUNTY Smith

Date Well Completed 8-26-97

Plugging Commenced 3:30 PM

Plugging Completed 7:45 PM

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

OPERATOR Center Petroleum, INC

ADDRESS Smith Center, KS

NEAREST OPERATORS LICENSE NO. 32038

Character of Well MURFIN Rig. # 3

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

Plugging proposal was approved on RUST # 1 - 8-26-97 (date)

\_\_\_\_\_ (KCC District Agent's Name).

ACO-1 filed? \_\_\_\_\_ If not, is well log attached? No

Producing Formation \_\_\_\_\_ Depth to Top \_\_\_\_\_ Bottom \_\_\_\_\_ T.O. \_\_\_\_\_

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 plug material was used, state the character of same and depth placed, from \_\_\_\_\_ feet to \_\_\_\_\_ feet each section.

LOGS, GAS OR WATER RECORDS | CASING RECORD

Formation	Content	From	To	Size	Put In	Pulled out

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 plug material was used, state the character of same and depth placed, from \_\_\_\_\_ feet to \_\_\_\_\_ feet each section.

Name of Plugging Contractor Allied Cementing Co. INC License No. 10-1-97 FD. 48.0727860

Address P.O. Box 31 - Russell, KS. 67665

Name of Party Responsible for Plugging Fees: Center Petroleum, Inc.

State of Kansas County of Smith, ss.

Estle Conaway (Employee of Operator) or (Operator) of 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 the same are true and correct, so help me God.

(Signature) Estle Conaway

(Address) Rt 2 Box 78

SUBSCRIBED AND SWORN TO before me this 29th day of September, 1997  
LEONA CONAWAY  
State of Kansas  
My Appt. Exp. April 3, 2000  
Leona Conaway  
Notary Public

My Commission Expires: April 3, 2000