

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

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

API NUMBER 15-095-21422-0000

LEASE NAME Rohman

WELL NUMBER A-1

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

3630 Ft. from S Section Line

990 Ft. from E Section Line

SEC. TWP. RGE. (E) or (W)

COUNTY Kingman

Date Well Completed 10-7-87

Plugging Commenced 1-15-87

Plugging Completed 1-20-89

LEASE OPERATOR TXO Production, Inc.

ADDRESS 1660 Lincoln St. Suite 1800 Denver, Colorado

PHONE# (303) 861-4246 OPERATORS LICENSE NO. 5171

Character of Well Gas

(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? Wichita

Is ACO-1 filed? x If not, Is well log attached? X

Producing Formation 1-C. Depth to Top Bottom T.D. 2500

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

- OIL, GAS OR WATER RECORDS -

CASING RECORD

Formation	Received	From	To	Size	Put In	Pulled out
STATE CORPORATION COMMISSION				8 5/8	266	200 Sacks none
				4 1/2	2487	1650

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 2432 to 2325-45 sacks cement with dump bailer. 2 sacks Hull 10 sacks gel
110 sacks cement 2% CC gel 60-40 POZ BJ Pump

Jack Luthre and Elmo Morgenstern on location

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

Name of Plugging Contractor Clarke Corporation License No. 5105

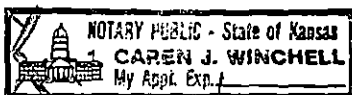
Address Box 187 Medicine Lodge, Ks. 67104

STATE OF Ks. COUNTY OF Barber, ss.

(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 P. Morgenstern

(Address) Box 187 Medicine Lodge, Ks. 67004



SUBSCRIBED AND SWORN TO before me this 25 day of January, 19 89

My Commission Expires: June 21, 1991

Notary Public