

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

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

API NUMBER 15-185-21016-0000

LEASE NAME R. Fisher

WELL NUMBER 6

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

         Ft. from S Section Line

         Ft. from E Section Line

SEC. 13 TWP. 22S RGE. 13W (E) or (W)

COUNTY Stafford

LEASE OPERATOR Glober Operating, Ins.

ADDRESS P.O Box 12 Great Bend, Kansas 67530

PHONE# (316) 792-7607 OPERATORS LICENSE NO. 6170

Date Well Completed         

Character of Well OIL

Plugging Commenced 9-9-99

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

Plugging Completed 9-10-99

The plugging proposal was approved on          (date)

by Richard Lacey (KCC District Agent's Name).

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

Producing Formation          Depth to Top          Bottom          T.O. 3670'

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"	734'	None
				5-1/2"	3662'	2600'

Describe in detail the manner in which the well was plugged, indicating where the mud fluid placed and the method or methods used in introducing it into the hole. If cement or other plugging materials were used, state the character of same and depth placed, from          feet to          feet each section. Plugged off bottom with sand to 3150' and 5 sks. cement. Shot pipe @2800', 2600', pulled up to 750', pumped 5 sks. gel and 50 sks. cement, pulled to 300', pumped 40 sks. cement, pulled to 40', pumped 10 sks. cement, pulled rest of pipe and topped with 10 sks. cement 60/40 pos. 6% gel 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: Globe Operating, Inc.

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 fact 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.

9-16-99

(Signature) [Signature]

(Address) P. O. Box 467 Chase, KS 67524

I,          SWORN TO before me this 15th day of September, 1999

KANSAS CORP COMM

[Signature]  
Notary Public

My Commission Expires:         

IRENE HERZBERG  
State of Kansas  
My Appt. Exp. Aug. 24, 2001

Form CP  
Revised 05-