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

WELL PLUGGING APPLICATION FORM
(PLEASE TYPE FORM AND FILE ONE COPY)

API # 15-147-20275-00-00 (Identifier number of this well). This must be listed for wells drilled since 1967; if no API# was issued, indicate spud or completion date.

WELL OPERATOR: Road Oil Co. Inc
ADDRESS: Box 428
CITY: Logan
STATE: KS
ZIP CODE: 67646
CONTACT PHONE #: (913) 689-7556

LEASE: Craig A
WELL#: A-10
SEC.: 2
T.: 4
R.: 19
EAST/WEST: (East/West)

SPOT LOCATION/EQQQ: 4950' FEET (in exact footage) FROM S/N (circle one) LINE OF SECTION (NOT Lease Line)
3090' FEET (in exact footage) FROM E/W (circle one) LINE OF SECTION (NOT Lease Line)

Check One: OIL WELL V GAS WELL _ D&A _ SWD/ENHR WELL _ DOCKET:

CONDUCTOR CASING SIZE: None
SET AT: CEMENTED WITH: SACKS
SURFACE CASING SIZE: 8 9/16
SET AT: 220
CEMENTED WITH: 100 SACKS
PRODUCTION CASING SIZE: 4 1/4
SET AT: 3401
CEMENTED WITH: 150 SACKS

LIST (ALL) PERFORATIONS and BRIDGEPUG SETS: 3/86-3378 CA

ELEVATION: 3037
T.D.: 3410
PBD: 3378
ANHYDRITE DEPTH: 1530-1560
(Stone Corral Formation)

CONDITION OF WELL: GOOD V POOR _ CASING LEAK _ JUNK IN HOLE

PROPOSED METHOD OF PLUGGING: As per state pluggers recommendation
KCC Hoys District office

(If additional space is needed attach separate page)

IS WELL LOG ATTACHED TO THIS APPLICATION AS REQUIRED? Yes _ IS ACO-1 FILED? _

If not explain why: __________________________________________________________________________

PLUGGING OF THIS WELL WILL BE DONE IN ACCORDANCE WITH K.S.A. 55-101 et. seq. AND THE
RULES AND REGULATIONS OF THE STATE CORPORATION COMMISSION.

LIST NAME OF COMPANY, REPRESENTATIVE AUTHORIZED TO BE IN CHARGE OF PLUGGING OPERATIONS:

Jim R. Baird
PHONE#: (913) 689-7456

ADDRESS: Box 428
City/State: Logan, KS

PLUGGING CONTRACTOR: Allied
ADDRESS: Hayden, KS

KCC LICENSE #: ____________

PROPOSED DATE AND HOUR OF PLUGGING (If Known?): ________________

PAYMENT OF THE PLUGGING FEE (K.S.A 42-3-118) WILL BE GUARANTEED BY OPERATOR OR AGENT
DATE: 8/27/96
AUTHORIZED OPERATOR/AGENT: ________________

RECEIVED: KANSAS CORPORATION COMMISSION
AUG 29 1996

CONSERVATION DIVISION
WICHITA, KS

8/29/96
LEASE OPERATOR ____________________________

ADDRESS ________________________________________

PHONE # ( ) ____________________ OPERATORS LICENSE NO. ____________________________

Character of Well ____________________________

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

WELL NUMBER ____________________________

Ft. from S Section Line ____________________________

Ft. from E Section Line ____________________________

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

COUNTY ____________________________

Date Well Completed ____________________________

Plugging Commenced ____________________________

Plugging Completed ____________________________

(date) ____________________________

by ____________________________ (KCC District Agent's Name).

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

Producing Formation ____________________________ Depth to Top ____________________________ Bottom ____________________________ T.D. ____________________________

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

OIL, GAS OR WATER RECORDS ____________________________

Casing Record ____________________________

<table>
<thead>
<tr>
<th>Formation</th>
<th>Content</th>
<th>From</th>
<th>To</th>
<th>Size</th>
<th>Put in</th>
<th>Pulled out</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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 were used, state the character of same and depth placed, from feet to feet each set.

Name of Plugging Contractor ____________________________

Address ____________________________

License No. ____________________________

NAME OF PARTY RESPONSIBLE FOR PLUGGING FEES: ____________________________

STATE OF ____________________________ COUNTY OF ____________________________

(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) ____________________________

(Address) ____________________________

SUBSCRIBED AND SWORN TO before me this ______ day of _________, 19__________

Notary Public ____________________________

My Commission Expires: ____________________________

USE ONLY ONE SIDE OF EACH FORM ____________________________

Form 0-4
Revised 05-65
State of Kansas
State Corp. Comm.
Conservation Division
200 Colorado Derby Bldg
Wichita, KS 67202

Re: Cran A-6, Vogel/B-1, and Cook 4-28

Dear Folks,

Enclosed please find plugging applications on the referenced wells.

Thanks for your assistance.

Sincerely,

[Signature]

RECEIVED
KANSAS CORPORATION COMMISSION
AUG 29 1996
CONSERVATION DIVISION
WICHITA, KS
NOTICE OF RECEIPT OF WELL PLUGGING APPLICATION (CP-1)

August 29, 1996

Baird Oil Co Inc
P O Box 428
Logan KS 67646

Grau A-6
API 15-147-20,275
4950 FSL 3090 FWL
Sec. 02-04S-19W
Phillips County

Dear Jim R. Baird,

This letter is to notify you that the Conservation Division is in receipt of your plugging proposal, form CP-1, for the above-captioned well.

Your CP-1 has been reviewed by the Conservation Division central office for completeness and to verify license numbers. The plugging proposal will now be forwarded to the district office listed below for review of your proposed method of plugging.

Please contact the district office for approval of your proposed plugging method at least at five (5) days before plugging the well, pursuant to K.A.R. 82-3-113 (b). If a workover pit will be used during the plugging of the well it must be permitted. A CDF-1 form must be filed and approved prior to the use of the pit.

The Conservation Division's review of form CP-1, either in the central or district office, does not include an inquiry into well ownership or the filing operator's legal right to plug the well.

This notice in no way constitutes authorization to plug the above-captioned well by persons not having legal rights of ownership or interest in the well. This notice is void after ninety (90) days from the above date.

Sincerely,

David P. Williams
Production Supervisor

District: #4
2301 E 13th
Hays KS 67601
(913) 628-1200