STATE OF KANSAS
STATE CORPORATION
COMMISSION
130 South Market Room 2078
Wichita, Kansas 67202

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

API NUMBER 15-007-20831-00-00

TYPE OR PRINT
NOTICE: Fill out completely
and return to Cons. Div. office within 60 days.

LEASE NAME Fulton

WELL NUMBER 1

SEC. 22 TWP. 32S RGE. 8 (E) or (W)

COUNTY Harper

Date Well Completed 9/18/1982

Plugging Commenced 4/26/2005

Plugging Completed 4/28/2005

LEASE OPERATOR Woolsey Petroleum Company

ADDRESS 125 N. Market, Suite 1000, Wichita, KS 67202

PHONE # 620-886-5606 OPERATOR’S LICENSE NO. 33168

Character of Well good

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

The plugging proposal was approved on 4/25/2005

by Doug Lewis (KCC District Agent’s Name).

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

Producing Formation Depth to Top 3406 Bottom 3424 T. D. CIBP @3600

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

OIL, GAS, OR WATER RECORDS

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CASING RECORD

Describe in detail the manner in which the well was plugged, indicating where the mud fluid was placed and the 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 CIBP at 3350’, (4/27/05) dump 3 sacks portland cement with dump bailer on plug, stretch and try to cut pipe (4/28/05) cut and pull pipe from 2600’, run 1250’ tubing. Allied pump 35 sacks, pull 800’, pump 35 sacks, pull to 325’, pump 125 to surface (4/29/05) top off with 6 sacks quick crete.

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

Name of Plugging Contractor Clarke Corporation

Address P.O. Box 187, 107 W. Fowler, Medicine Lodge, KS 67104

NAME OF PARTY RESPONSIBLE FOR PLUGGING FEES: Woolsey Petroleum Company

STATE OF Kansas COUNTY of Barber ss.

John Swinford 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 filled that the same are true and correct, so help me God.

Signature

(Address) P.O. Box 187, Medicine Lodge, KS 67104

SUBSCRIBED AND SWORN TO before me this 9 day of June, 2005

Notary Public

My Commission Expires: November 30, 2006

RECEIVED
JUN 10 2005
KCC WICHITA