Notice: Fill out COMPLETELY and return to Conservation Division at the address below within 60 days from plugging date.

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION
WELL PLUGGING RECORD
K.A.R. 82-3-117

Lease Operator:  Heartland Oil & Gas Corporation
Address: 1610 Industrial Park Drive Paola KS 66071
Phone: (913) 294 - 1400 Operator License #: 33233
Type of Well: SWD
Docket #: 3-3-06
Per Permit:
(Oil, Gas D&B, SWD, ENHR, Water Supply Well, Cathodic, Other)
Spot Location (QQQO): NE - NE 810
Feet from North:
Feet from East:
Sec. 30 Twp. 6 S. R. 16
County: Jackson
Date Well Completed: 3-12-04
Plugging Commenced: 2-14-06
Plugging Completed: 2-14-06

API Number: 15 - 085-20060-00-00
Lease Name: Amon
Well Number: 41 - 30 WD

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

<table>
<thead>
<tr>
<th>Oil, Gas or Water Records</th>
<th>Casing Record (Surface Conductor &amp; Production)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Formation</td>
<td>Content</td>
</tr>
<tr>
<td>Surface</td>
<td>GL</td>
</tr>
<tr>
<td>Production</td>
<td>GL</td>
</tr>
</tbody>
</table>

Name of Plugging Contractor: Hurricane Well Service, Inc.
Name of Party Responsible for Plugging Fees: Hurricane Well Service, Inc.
Address: PO Box 782228 Wichita KS 67278-2228

Name of Plugging Contractor: Hurricane Well Service, Inc.
Name of Party Responsible for Plugging Fees: Hurricane Well Service, Inc.
Address: PO Box 782228 Wichita KS 67278-2228

Name of Party Responsible for Plugging Fees: Hurricane Well Service, Inc.
Address: PO Box 782228 Wichita KS 67278-2228

Employee of Operator or (Operator) on 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 is as filed, and the same are true and correct, so help me God.

(Signature) [Signature]
(Address) PO Box 782228 Wichita KS 67278-2228

Mail to: KCC - Conservation Division, 130 S. Market - Room 2078, Wichita, Kansas 67202

Form CP-4
December 2003
Type or Print on this Form
All blanks must be filled