**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**

**API Number:** 15 - 007-22262 - 00 - 00  
**Lease Name:** Bailer  
**Well Number:** #2

**Lease Operator:** Woolsey Operating Company, LLC  
**Address:** P.O. Box 3/2, Hays KS 67601  
**Phone:** (620) 886 - 5606  
**Operator License #:** 33168

**Type of Well:** Gas  
**Docket #:** (Oil, Gas D&A, SWD, ENHR, Water Supply Well, Cathodic, Other) (If SWD or ENHR)

The plugging proposal was approved on: 2/21/2006  
by: Eric McClennen  
(KCC District Agent's Name)

Is ACO-1 filed? Yes No  
If not, is well log attached? Yes No

Producing Formation(s): List All (If needed attach another sheet)

<table>
<thead>
<tr>
<th>Open Hole</th>
<th>Depth to Top:</th>
<th>Bottom:</th>
<th>T.D.</th>
</tr>
</thead>
<tbody>
<tr>
<td>4838</td>
<td></td>
<td>4946</td>
<td>4946</td>
</tr>
</tbody>
</table>

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></td>
<td></td>
</tr>
<tr>
<td>8 1/2</td>
<td>388</td>
</tr>
<tr>
<td>4 1/2</td>
<td>4838</td>
</tr>
</tbody>
</table>

Describe in detail the manner in which the well is 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 depth placed from (bottom), to (top) for each plug set.

2/21 - Set CIBP at 4750’. 2-22 - spot 2 sacks cement on CIBP with dump bailer, rig up casing tools, stretch and cut pipe at 2900’, pull casing

2/23 - run 2 3/8” tubing to 830’, Allied load hole with 10 sacks gel, 300# hulls, spot 50 sacks 60/40 poz, 6% gel, pull to 400’, spot 50 sacks, pull to 40’, load with 15 sacks, operator supervised, top off with 2 yards Redi-mix

**Name of Plugging Contractor:** Clarke Corporation  
**License #:** 5159 - 5105

**Address:** P.O. Box 187, Medicine Lodge, KS 67104

**Name of Party Responsible for Plugging Fees:** Woolsey Operating Company, LLC

**State:** Kansas  
**County:** Barber, ss.

**John Swinford**  
(Employee of Operator) or (Operator) on above listed well.

Supeindently 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 true and correct, and the same are true and correct, so help me God.

**Signature:** John Swinford  
**Address:** P.O. Box 187, Medicine Lodge, KS 67104

**Glenda Morrison**  
Notary Public  
My Commission Expires: 11/30/66

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