

PLUG & ABANDONMENT FORM

API NO. _____

OPERATOR Charles B. Gillespie

LEASE NAME St 7

WELL NO. 4

SEC. 4

TWP. 15

RANGE 33

UNIT 1

Date plugging operations began - _____

Date plugging operations completed - Pride Plugging Service

Name of plugging company - finished 10-22-93

Comments: _____

Signed By: Jack Griffin

Date: 10-25-93