

PLUG & ABANDONMENT FORM

API NO. _____
OPERATOR Water Dept -
LEASE NAME Eidson AAO St
WELL NO. 1
SEC. 31 TWP. 15 RANGE 33 UNIT A

Date plugging operations began - 07-26-94

Date plugging operations completed - 08-01-94

Name of plugging company - United Well Service

Comments: _____

Signed By: Jack Griffin

Date: 08-01-94