My commission expires_

STATE OF OREGON DEF MENT OF GEOLOGY AND MINERAL INC RIES 1069 State Office Building Portland 1, Oregon

PLUGGING RECORD

The owner or operator of any oil or gas well or stratigraphic hole shall file this form with the Director of the State of Oregon Department of Geology and Mineral Industries setting forth in detail the method used in plugging such well. The form must be filed within twenty (20) days after plugging for oil and gas wells, or within sixty (60) days for stratigraphic holes.

	Company, Inc.		_ Field	Izee A	rea				
	- • • -··								
			County_	Grant			<u></u>		
ADDRESS ALL CORRESPONDE	NCE CONCERNING	THIS FOR							
Street 520 South Murph	y Avenue	_City	Sunnyv	ale		_ State_	Cali	<u>forni</u>	<u>a</u>
Lease Name Federal-Mitc	hell	Well No	o. <u>1</u>	SE‡ Sec	14_	T.	1 <u>6</u> S	R	29 E
Date well was plugged									
Was the well filled with mud la Mineral Industries?				Board of th	e State o	f Oregon	Departm	ent of	Geology and
How was the mud applied?	Mud pump	We	re plugs us	ed?	No		f so, show	v all sh	oulders left
for casing, depth of each, and	size of casing, size	and kind of	plugs used,	and depth:	placed.	Also a	mount of	cemen	t and rock.
Use additional sheets if necessa	ry.								
6-5/8" casing cem	ented at 76 fe	eet with	30 sack	s of cen	ent.				
4-3/4" hole drill	ed 76 - 1168 i	feet.							
Plugged (60'-260' Pipe cut 3' below welded on top of Was notice given, before plugg	surface and	plugged I	LO! with	2 sacks	of ce	ment,	steel	plate	
was notice given, before plugg	ing, to all available	e adjoining	pipe we lease and l	and owners	of we	plug 11 arc	with n	ame & led or	No.
was notice given, before plugg	ing, to all avariable	_		ell /				ame & led or	No.
was notice given, before plugg	ing, to all avanaol	_ 71						ame & led or	No.
State of Oregon	ing, to all available	_ 71	litch					ame &	No.
	ing, to all available	_ 71	litch					ame &	No.
State of Oregon	nteri	AFFII	litch	, <i>fel /</i> (Operator)	orn, say			No.
State of Oregon County of Grant I, Mitchell Pusa the facts stated herein, that the	ateri ey are true and corre	AFFII	DAVIT	, <i>fel /</i> (Operator)	orn, say			No.
State of Oregon County of Grant I, Mitchell Pusa	ateri ey are true and corre me this 30	AFFII ect, and tha	DAVIT	, <i>fel /</i> (Operator)	orn, say			No.