

STATE OF KANSAS
STATE CORPORATION COMMISSION
130 S. Market, Room 2078
Wichita, KS 67202

WELL PLUGGING RECORD
K.A.R.-62-3-117

API NUMBER 15-055-21328-00-00
LEASE NAME Anderson-Shrier #2-31
WELL NUMBER 2-31

NOV 10 2003

TYPE OR PRINT
NOTICE: Fill out completely
and return to Cons. Div.
office within 30 days.

KCC WICHITA

1320 Ft. from S Section Line
3960 Ft. from E Section Line
SEC. 31 TWP. 22 SRGE. 33W (E) or (W)
COUNTY Finney
Date Well Completed 09/21/94
Plugging Commenced 10/30/03
Plugging Completed 10/30/03

LEASE OPERATOR Chesapeake Operating, Inc.
ADDRESS P. O. Box 18496, Oklahoma City, OK 73154-0496
PHONE# (409) 848-8000 OPERATORS LICENSE NO. 32334

Character of Well Gas
(Oil, Gas, D&A, SWD, Input, Water Supply Well)

The plugging proposal was approved on 05/29/03 (date)
by David Williams (KCC District Agent's Name).

Is ACO-1 filed? Yes If not, is well log attached? _____

Producing Formation Chase Depth to Top 2566' Bottom 2657' T.D. 2700'

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

OIL, GAS OR WATER RECORDS

CASING RECORD

Formation	Content	From	To	Size	Put in	Pulled out
				8-5/8	342'	
				4-1/2	2700'	

Describe in detail the manner in which the well was plugged, indicating where the mud fluid was placed and the method or methods used in introducing it into the hole. If cement or other plug were used, state the character of same and depth placed, from feet to feet each set: MIRU Allied, pump down 4-1/2" csg w/400# hulls, followed w/110 sx cmt, 60/40 Poz 6% gel, max PST 1000#, ST @800#, let set 30 min., top off w/25 sx @ surface, tie on backside, pump 20 sx cmt, did circ to surface, max PST 500#, ST @500#, RDMO, Well P&A'd

Name of Plugging Contractor Allied Cementing Co., Inc. License No. _____
Address P. O. Box 31, Russell, KS 67665 (785)483-2626

NAME OF PARTY RESPONSIBLE FOR PLUGGING FEES: Chesapeake Operating, Inc.

STATE OF Oklahoma COUNTY OF Oklahoma, ss.

Jim Reisch

(Employee of Operator) or (Operator) o

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

(Signature) [Signature] Jim Reisch

(Address) P. O. Box 18496, Okla. City, OK 73154-0496

WITNESSED AND SWORN TO before me this 7th day of November, 2003

Jarri R. Brody
Notary Public



Commission Expires: April 17, 2007

ALLIED CEMENTING CO., INC. 14788

Federal Tax I.D. # [REDACTED]

REMIT TO P.O. BOX 31
RUSSELL, KANSAS 67665

SERVICE POINT: Cigkley

DATE: <u>11-30-03</u>	SEC: <u>31</u>	TWP: <u>22s</u>	RANGE: <u>33w</u>	CALLED OUT	ON LOCATION: <u>8:15 AM</u>	JOB START: <u>9:00 AM</u>	JOB FINISH: <u>10:45 AM</u>
LEASE: <u>Anderson</u>	WELL #: <u>2-31</u>	LOCATION: <u>Holcomb 6 1/4 N E 1/4</u>			COUNTY: <u>Finney</u>	STATE: <u>K.S.</u>	

CONTRACTOR _____	OWNER _____
TYPE OF JOB: <u>Plug old well</u>	CEMENT
HOLE SIZE: _____ T.D. _____	AMOUNT ORDERED: <u>200 sks 60/40 P2 62 1/2</u>
CASING SIZE: <u>4 1/2</u> DEPTH _____	<u>400 # Hulls</u>
TUBING SIZE _____ DEPTH _____	<u>Used 155 sks</u>
DRILL PIPE _____ DEPTH _____	COMMON: <u>93 sks @ 8.35 = 776.55</u>
TOOL _____ DEPTH _____	POZMIX: <u>62 sks @ 3.80 = 235.60</u>
PRES. MAX: <u>1000 #</u> MINIMUM _____	GEL: <u>8 sks @ 10.00 = 80.00</u>
MEAS. LINE _____ SHOE JOINT _____	CHLORIDE _____ @ _____
CEMENT LEFT IN CSG _____	<u>Hulls 4 sks @ 18.00 = 72.00</u>
PERFS. _____	_____ @ _____
DISPLACEMENT _____	_____ @ _____

EQUIPMENT

PUMP TRUCK CEMENTER: <u>Dean</u>
<u>323-281</u> HELPER: <u>Andrew/Max</u>
BULK TRUCK
<u>212</u> DRIVER: <u>Fuzzy</u>
BULK TRUCK
_____ DRIVER _____

HANDLING: <u>200 sks @ 1.15 = 230.00</u>
MILEAGE: <u>59 sk/mile = 650.00</u>
TOTAL: <u>2044.15</u>

REMARKS:
Tied on 4 1/2 cas pump 400 #
Hulls followed w/ 110 sk cement
Max press 1000 # shut in 800 #
pump 20 sks down on S. side max
press 500 #. Top 4 1/2 cas off
w/ 25 sks.
Thank you

SERVICE

DEPTH OF JOB _____
PUMP TRUCK CHARGE _____ <u>580.00</u>
EXTRA FOOTAGE _____ @ _____
MILEAGE: <u>65 Miles @ 3.50 = 227.50</u>
PLUG _____ @ _____
_____ @ _____
_____ @ _____
TOTAL: <u>807.50</u>

CHARGE TO: Chesapeake

STREET _____

CITY _____ STATE _____ ZIP _____

FLOAT EQUIPMENT

_____ @ _____
_____ @ _____
_____ @ _____
_____ @ _____
_____ @ _____
TOTAL _____

To Allied Cementing Co., Inc.
 You are hereby requested to rent cementing equipment and furnish cementer and helper to assist owner or contractor to do work as is listed. The above work was done to satisfaction and supervision of owner agent or contractor. I have read & understand the "TERMS AND CONDITIONS" listed on the reverse side.

TAX _____

TOTAL CHARGE _____

DISCOUNT _____ IF PAID IN 30 DAYS

SIGNATURE: Dennis Frick

PRINTED NAME: Dennis Frick