

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

WELL PLUGGING RECORD
K.A.R.-82-3-117

API NUMBER 15-175-21658-00-00

LEASE NAME Sloan A

RECEIVED

TYPE OR PRINT

MAR 03 2004

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

WELL NUMBER 3

3410 Ft. from S Section Line

412 Ft. from E Section Line

KCC WICHITA

SEC. 8 TWP. 32 RGE. 34 (or (W))

LEASE OPERATOR Oxy USA, Inc.

COUNTY Seward

ADDRESS 1701 N. Kansas Pk Box 2528 Liberal, KS. 67905

PHONE (620) 629-4206 OPERATORS LICENSE NO. _____

Date Well Completed 11-1-97

Character of Well Gas

Plugging Commenced 1-29-04

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

Plugging Completed 1-29-04

The plugging proposal was approved on 1-26-04 (date)

by Jim Holland (KCC District Agent's Name)

Is ACO-1 filed? No If not, is well log attached? No. Well never produced.

Producing Formation Chester Depth to Top 6120 Bottom 6192 T.D. 6400'

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
<u>Sand</u>			<u>1741</u>	<u>8 3/4</u>	<u>1741</u>	<u>0</u>
<u>Prod</u>			<u>6372</u>	<u>5 1/2</u>	<u>6372</u>	<u>0</u>
<u>Misc</u>			<u>3071</u>			
<u>C.I.P.</u>			<u>6224</u>			

Describe in detail the manner in which the well was plugged, indicating where the mud fluid placed and the method or methods used in introducing it into the hole. If cement or other pl were used, state the character of same and depth placed, from ___ feet to ___ feet each s
Mixed 300 lb. hulls & 25 sx cmt. to plug perfs from 6120 to 5920, mud spacer to 1775, 30 sx cmt. 1775 to 1525, mud spacer to 550, 65 sx cmt. 550 to 0 Pressure up on annulus. Cut off 8 3/4 & 5 1/2 & capped 8 3/4 5 ft. below G.C.

Name of Plugging Contractor SARGENT AND HORTON PLUGGING, INC. License No. 31151

Address Route 1, Box 49BA Tyrone, OK 73951-9731 (580) 854-6515

NAME OF PARTY RESPONSIBLE FOR PLUGGING FEES: Oxy USA Inc.

STATE OF Kansas COUNTY OF Seward, ss.

Kenny Andrews (Employee of Operator) or (Operator above-described well, being first duly sworn on oath, says: That I have knowledge of the fact statements, and matters herein contained and the log of the above-described well, as filed the same are true and correct, so help me God.

(Signature) [Signature]

(Address) PO Box 2528 Liberal, KS. 67905

SUBSCRIBED AND SWORN TO before me this 1st day of March, 2004

Anita Peterson
Notary Public

ANITA PETERSON Commission Expires: Oct. 1, 2005
MY COMMISSION EXPIRES
October 1, 2005

