

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

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

15-147-00913-00-00

API NUMBER 15-N/A

LEASE NAME Veeh A

WELL NUMBER 3

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

2970
3010 Ft. from S Section Line

4910 Ft. from E Section Line

LEASE OPERATOR OXY USA Inc.

SEC. 31 TWP. 5S RGE. 20 (X) or (W)

ADDRESS P. O. Box 26100

COUNTY Phillips

PHONE# (405) 749-2309 Operators License #5447

Date Well Completed 9/8/42

Character of Well Oil

Plugging Commenced 4/26/95

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

Plugging Completed 4/26/95

The plugging proposal was approved on 11/10/94 (date)

by Dennis Hamel (KCC District Agent's name).

Is ACO-1 filed? no If not, is well log attached? no

Producing Formation Reagan Depth to Top 3640 Bottom 3650 T.D. 3681

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
Reagan	Oil	3640	3650	8 5/8"	155	
				5 1/2"	3681	

Describe in detail the manner in which the well was plugged, indicating where the mud fluid was placed and the 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.

Perf @ 1122-23 & 1822-23. Mixed & pumped 63sks 60/40 pozmix w/10%gel 1 1/4# Flocele per sk. & 400# hulls followed by 200sks same cement. Hole loaded w/ 32bbls pumped. Pump press 1000# @ 2 BPM/200 sks cmt. Finished pumping 5 1/2 @ 1000# shut-in & held @200#. Hooked up to 8 5/8-5 1/2 annulus & pumped 137sks w/100# hulls @400#, 49 1/2 bbl total volume. (See back of form)

(If additional description is necessary, use BACK of this form.)

Name of Plugging Contractor Hi-Plains Production Inc. License No. 8003

Address P. O. Box 307, Logan, KS 67646

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

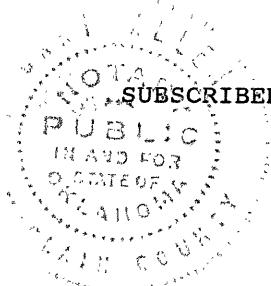
STATE OF OKLAHOMA COUNTY OF OKLAHOMA, ss.

Jerry Ledlow (Employee of Operator) or (Operator) of 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 that the same are true and correct, so help me God.

MAY 10 1995
5-5-95

(Signature) [Handwritten Signature]

(Address) P. O. Box 26100, OKC, OK 73126-0100



SUBSCRIBED AND SWORN TO before me this 2nd day of May, 19 95

Cari Allen
Notary Public

My Commission Expires: 7-14-95

Shut-in @ 200# & held. Cut off csg 5' below ground level.