

API NUMBER 15-163-21,231-00-00

LEASE NAME MARCOTTE

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

WELL NUMBER 3

1320 Ft. from S Section Line

330 Ft. from E Section Line
 E/2 E/2 SE/4

SEC. 19 TWP. 9 RGE. 19 (E) or (W)

LEASE OPERATOR ANDERSON ENERGY, Inc.

ADDRESS 200 E FIRST ST. SUITE 414 WICHITA, KS 67202

PHONE#(316) 265-7929 OPERATORS LICENSE NO. 6484

Character of Well CSG LEAK

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

COUNTY ROOKS

Date Well Completed 1-19-1981

Plugging Commenced 2-8-1990

Plugging Completed 2-8-1990

The plugging proposal was approved on 2-1-1990 (date)

by MARION SCHMIDT & DON BUTCHER (KCC District Agent's Name).

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

Producing Formation ARBuckle - Disposal Depth to Top 3564' Bottom 3776' T.D. 3776'

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

OIL, GAS OR WATER RECORDS | 8 5/8" Cement - 200SKs CASING RECORD 5 1/2" @ 1550' to 100'
375 @ 1550' to 100'
5 1/2" 150 ON BOTTOM

Formation	Content	From	To	Size	Put In	Pulled out
SHALE & SAND	FRESH WATER	312'	Surf	8 5/8"	312'	NONE
ARB - Dolomite	OIL - WATER	3563.5'	Surf	5 1/2"	3563.5'	NONE

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 plugs were used, state the character of same and depth placed, from ^{2210'} feet to ^{Surf} feet each set.
Top To 2210' - 310 SKs @ 50 bps; Top to 1600' - 100 SKs w/4 HULLS. Top to 800' - 235 SKs
4 HULLS & circulated TO SURF. PUT 5 SKs IN ANNULUS - 400 MAX, 250 PSI SIP.
Squeezed 5 1/2" csg thru a swage w/ 50 SKs - 200 MAX 100 PSI SIP. TIME 1445 HRS.

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

Name of Plugging Contractor Allied Cementing, Inc License No. _____

Address P.O. Box 31 Russell, KS 67665

NAME OF PARTY RESPONSIBLE FOR PLUGGING FEES: Anderson Energy, Inc (William L. Anderson)

STATE OF KANSAS COUNTY OF ELLIS, ss.

Robert A. Wahlmeier (Agent) (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.

(Signature) Robert A. Wahlmeier

(Address) 413 W. 14th St.

SUBSCRIBED AND SWORN TO before me this 9th day of February, 1990

Marietta G. Ruder
 Notary Public

My Commission Expires: _____



RECEIVED
 STATE CORPORATION COMMISSION
 2/14/90
 FEB 14 1990
 CONSERVATION DIVISION
 Wichita, Kansas