

STATE OF KANSAS  
STATE CORPORATION COMMISSION  
200 Colorado Derby Building  
Wichita, Kansas 67202

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

API NUMBER 15-007-20,661-0001

LEASE NAME Harbaugh

WELL NUMBER H-3

2310 Ft. from  Section Line

990 Ft. from  Section Line

SEC. 28 TWP. 33S RGE. 14 ~~W~~ (W)

COUNTY Barber

Date Well Completed \_\_\_\_\_

Plugging Commenced 10-2-97

Plugging Completed 10-9-97

LEASE OPERATOR Oxy, USA

ADDRESS 400 S. Main, Pratt, KS 67124

PHONE# (316) 672-5630 OPERATORS LICENSE NO. 5447

Character of Well good

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

The plugging proposal was approved on 10-2-97 (date)

by Kevin Strobe (KCC District Agent's Name).

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

Producing Formation Miss Depth to Top 4605 Bottom 4712 <sup>PBTD</sup> T.O. 4791

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	404	None
				5 1/2	4856	3100

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    feet to    feet each section. Sand well back to 4540, dump 5sx portland cement with dump bailer, stretch and cut pipe at 3100, lay down 5 1/2 casing. Allied pump 300 hulls, 10sx jel, 50sx cement 10sx jel, 100 hulls, 8 5/8 wiper plug and 100sx cement, 60/40 6% jel

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

Name of Plugging Contractor Clarke Corporation License No. 5105

Address P.O. Box 187, Medicine Lodge, KS 67104

NAME OF PARTY RESPONSIBLE FOR PLUGGING FEES: Oxy, USA

STATE OF Kansas COUNTY OF Barber, ss.

Alan Vratil (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 to the same are true and correct, so help me God.

(Signature) [Signature]

(Address) Medicine Lodge, KS 67104



SUBSCRIBED AND SWORN TO before me this 20 day of October, 19 97

[Signature]  
Notary Public

My Commission Expires: 10/14/98