

STATE OF KANSAS
STATE CORPORATION COMMISSION
Finney State Office Building
130 South Market, Rm 2078
Wichita, Kansas 67202

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

API NUMBER 15-129-215800000

LEASE NAME DAVISON "B"

WELL NUMBER 3

4620 Ft. from S Section Line

3240 Ft. from E Section Line

SEC. 18 TWP. 33 RGE 39 (E) or (W)

COUNTY MORTON

Date Well Completed 5/7/1999

Plugging Commenced 5/8/1999

Plugging Completed 5/9/1999

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

LEASE OPERATOR ANADARKO PETROLEUM CORPORATION

ADDRESS P.O. BOX 351, LIBERAL, KS 67901-0351

PHONE # (316) 624-6253 OPERATORS LICENSE NO. 4549

Character of Well D&A

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

The plugging proposal was approved on 5/7/1999 (date)

by DODGE CITY DISTRICT OFFICE (KCC District Agent's Name)

Is AC0-1 filed? YES If not, is well log attached? _____

Producing Formation NONE Depth to Top _____ Bottom _____ 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
				8-5/8"	1657'	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 ___ feet to ___ feet each set. TIH W/4 1/2" DP TO 3000' & SPOT 100 SKS 60/40 POZMIX, 6%GEL @ 3000', TOH TO 1680' & SPOT 50 SKS, TOH TO 500' & SET 40 SKS, TOH TO 40' & SET 10 SKS FROM 40' TO 0'. SET 10 SKS IN MH & 15 SKS IN RH. CUT OFF 8-5/8" CSG 3' BELOW GL AND CAP, PERMANENTLY INSCRIBE WELL NAME, NUMBER AND DATE PLUGGED ON CAP.

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

Name of Plugging Contractor HALLIBURTON ENERGY SERVICES License No. 5287

Address P. O. BOX 1598, LIBERAL, KANSAS 67905-1598

NAME OF PARTY RESPONSIBLE FOR PLUGGING FEES: ANADARKO PETROLEUM CORPORATION

STATE OF KANSAS COUNTY OF SEWARD, ss.

L. MARC HARVEY, DRILLING TECHNICAL ASSISTANT (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.

RECEIVED
STATE CORPORATION COMMISSION

(Signature) L. Marc Harvey 5/19/99

L. MARC HARVEY, DRILLING TECHNICAL ASSISTANT
(Address) P.O. BOX 351, LIBERAL, KS 67901-0351

MAY 20 1999
5-20-99
CONSERVATION DIVISION
Wichita, Kansas

SUBSCRIBED AND SWORN TO before me this 19th day of May, 1999

My Commission Expires:

FREDA L. HINZ
Notary Public - State of Kansas
My Appt. Expires 5-15-2003

Notary Public